



COUNTY BOROUGH OF OLDHAM

ANNUAL REPORT

OF THE

**MEDICAL OFFICER OF
HEALTH**

1951



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Public Health Department,
Town Hall,
Oldham.

To the Chairman and Members of the Health Committee,
Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my Annual Report on the Health of Oldham and the work of the Public Health Department for the year 1951.

The year saw a change in the pattern of the National Health Service. Consequent upon the passing of the National Health Service Act, 1951, charges became operative for the provision of dentures and optical appliances supplied through the general dental and supplementary services. The effect of these charges will be to reduce the expenditure on these services by the recovery of some of the cost and by reducing, probably substantially, the demands for these services. No one will deny that there has been abuse of these services by individuals which is to be regretted but the new charges will bear heavily upon those classes who can ill afford to meet them and the result will be that in many cases treatment will not be sought when it is most necessary.

The National Assistance (Amendment) Act, 1951, came into force on the 1st September and provides an emergency procedure for the removal to suitable premises of persons urgently in need of care and attention. This new legislation was urgently required and later in the year had to be used in unusual circumstances which are fully described in the Report.

There has been no major change in the services provided by the Local Health Authority under Part III of the National Health Service Act. An efficient dental service has again been provided and is fully described in the Report. The provision of day nursery accommodation remained unaltered and the nurseries were well patronised by mothers who go out to work. The work of the Midwives' Service has increased during the year, the midwives attending 731 confinements compared with 648 in the previous year. This increase is largely due to fewer mothers being admitted to the maternity unit at Boundary Park General Hospital owing to shortage of staff. The number of patients referred as "hospital discharges" before the fourteenth day has also increased and is becoming a heavy responsibility. The Health Visiting Service was again seriously handicapped through shortage of staff. Improved conditions of appointment for Student Health Visitors may help to solve the problem. The Home Nursing Service and the Domestic Help Service have met increasing demands. The main demand for these services is from persons in the age group "over 65 years." In many cases these patients were in need of hospital care and treatment but could not be admitted to the Boundary Park General Hospital Annexe owing to lack of accommodation. In this connection the provision of a night/attendant has met a real need. The calls on the Ambulance Service showed a moderate increase. There was one major accident during the year which is fully described in the Report. Experience has shown that this service can be operated with a limited number of ambulances, but that there is a need for more sitting case vehicles. The Ambulance Sub-Committee are fully alive to this problem.

The Mental Health Service has made great strides. The number of Mental Health Visitors is now up to establishment and complete co-operation has been effected with the Oldham and District Hospital Management Committee. The appointment of Dr. Arthur Pool as

Consultant Psychiatrist to the Local Health Authority is of the greatest value as in this capacity he can advise and assist in the development of the service. In the field of mental deficiency an almost complete service is provided. There is the closest co-operation with the services provided by the Education Committee as the Medical Officer of Health is also School Medical Officer. Dr. G. S. Robertson, Consultant in Mental Deficiency, visits Oldham at regular intervals and his help is greatly appreciated. The Occupation Centre has been fully staffed throughout the year, but no progress has been made in the provision of an Industrial Centre for adult defectives.

I would refer you to the report of the special investigation that is being undertaken by the Medical Research Council. This authority is co-operating fully and the large number of volunteers reflects credit on all concerned. It should be appreciated that this enquiry is not just a piece of research. All the school leavers taking part receive regular X-ray examination and medical supervision over a number of years and in addition many of them receive protective vaccination against tuberculosis.

The birth rate of 16.23 per thousand of the population compares with 15.64 for the previous year. This slight rise in the birth rate is peculiar to Oldham and has not been experienced by other Lancashire towns. It may be associated with the extension of the Borough by the Oldham Extension Act of 1950 which became operative on the 1st April, 1951, and which brought into the Borough the new post-war Limeside Estate. The death rate of 15.05 compares with 14.38 for the previous year, and this rise is undoubtedly due to the prevalence of influenza in the early part of the year. The infant mortality rate of 40.74 per thousand live births compares with 29.6 for England and Wales and 35.31 for the previous year. This increase was mainly due to neo-natal deaths (infant deaths under one month), this rate having risen from 18.73 to 23.72 per thousand live births and the deaths increasing from 35 to 46. There were 37 deaths due to tuberculosis (all forms) and the death rate of 0.31 per thousand of the population compares with 0.39 for the previous year. There was one maternal death and the maternal mortality rate of 0.50 compares with 0.52 for the previous year.

The year was notable for the complete absence of diphtheria no cases being diagnosed or notified. An epidemic of measles which commenced in December of the previous year continued into the first four months of the year. A mild form of epidemic influenza was prevalent in the early weeks of the year and during January and February accounted for a sharp rise in deaths from respiratory diseases. Dysentery again caused concern and was prevalent during the first five months of the year. This disease dramatically and suddenly subsided and comparatively few cases occurred after May.

No case of smallpox occurred in the Borough but there were tragic happenings in Brighton and during December (1950) and January, twenty-nine cases were confirmed and ten deaths occurred. In this outbreak thirteen cases—nine of them nurses, of whom three died; two domestic workers, who both died; one gardener, who died; and one patient, a baby who recovered—were all infected in the hospital to which the original cases were admitted. It is of vital importance that all persons whose duties may bring them into contact with smallpox should be adequately protected by recent vaccination. In the case of certain

vocations, vaccination or re-vaccination on appointment would appear to be a very necessary condition of service and that such staff should submit to regular re-vaccination.

On the 1st April the Oldham Extension Act, 1950, became operative and added 605 acres to the Borough. This extension has been granted primarily for the housing needs of the Borough. During the year 220 new corporation houses were erected but no progress can yet be made with slum clearance. At the end of the year there were 2,460 families requiring re-housing on the waiting list of the Housing Manager.

The Committee again gave consideration to the adoption of the model bye-laws in relation to smoke abatement, and in December resolved that the bye-laws be adopted in principle, and submitted to the Ministry of Health for preliminary approval. There is need for further legislation in the field of smoke abatement, and it is to be regretted that in this connection, as compared with other County Boroughs, this Authority has made no progress.

There have been a number of staff changes during the year. In May, Dr. A. P. Curran left to take up the post of Deputy Medical Officer of Health, Luton. Dr. A. P. Buchan left in December, having secured an appointment at Whittingham Hospital. Both these officers were loyal colleagues and served the Department well. As the Council had not implemented the award of the Industrial Court for Public Health Medical Officers which was announced in the previous December, these vacancies were not filled until after the close of the year. In April, Mr. W. E. Cooke, Ambulance Officer, left to take up an appointment with the Ambulance Service of the Middlesex County Council. Mr. Cooke joined the staff in May, 1948, and in the early transitional period, his duties were onerous and exacting. In December, Miss C. Bonsall, Superintendent of District Nurses, died after a short illness. Miss Bonsall had been Superintendent of the Oldham Nursing Association and with other members of the staff, became an employee of the Health Committee on the "appointed day." Her knowledge and experience of the service were of great value and resulted in this new responsibility for the Committee being launched smoothly and efficiently. Her sudden loss was a great shock.

In April, Councillor C. Turner, who joined the Health Committee in May, 1950, ceased to be a member. In June, Councillor W. Buckley also ceased to be a member of the Health Committee as he left the town to take up an appointment in Australia. Although Councillor Buckley only joined the Committee in May, 1949, he soon proved himself a very active member and during the year 1949-50 he was Chairman of the Home Nursing Sub-Committee. Our good wishes were extended to him in his new life. I wish to record my sincere appreciation of the co-operation and courtesy received from these members.

I wish to tender my sincere thanks to the Chairman and Members of the Health Committee for their support and encouragement. My thanks are also due to all members of the staff for their loyal service during a busy year.

I have the honour to be,

Your obedient Servant,

J. T. CHALMERS KEDDIE,

MEDICAL OFFICER OF HEALTH,

THE HEALTH COMMITTEE

(from 16th May, 1951)

Chairman:

Alderman S. T. Marron, J.P., F.C.C.S.

Deputy Chairman:

Councillor G. Halbert

The Mayor:

Alderman Frank Lord, O.B.E., J.P.

Councillor J. A. Arthurs, J.P.

Councillor J. Bradley

Councillor W. Buckley
(to 20-6-51)

Councillor A. E. Stead
(from 1-8-51)

Councillor D. C. Hanson.

Councillor E. Rothwell

Councillor A. E. Millward
(to 1-8-51)

Councillor W. Barker
(from 1-8-51)

Non-Council Members:

M. Strang, Esq., M.B., Ch.B.

Mrs. G. Morrell, J.P.

Don Hilson, M.A., M.B., B.Chir., M.R.C.P., D.C.H.
(from 1-8-51)

Alderman F. Lord, O.B.E., J.P.

Miss A. Rawcliffe

MATERNITY AND CHILD WELFARE SUB-COMMITTEE

Chairman:

Alderman S. T. Marron, J.P., F.C.C.S.

Deputy Chairman:

Councillor G. Halbert

The Mayor

Councillor J. A. Arthurs, J.P.

Councillor D. C. Hanson

Councillor E. Rothwell

Non-Council Members:

M. Strang, Esq., M.B., Ch.B.

Mrs. G. Morrell, J.P.

Don Hilson, M.A., M.B., B.Chir., M.R.C.P., D.C.H.
(from 1-8-51)

Alderman F. Lord, O.B.E., J.P.

Miss A. Rawcliffe

HOME NURSING SUB-COMMITTEE

Chairman:

Councillor D. C. Hanson

The Mayor

Alderman S. T. Marron, J.P.

Councillor J. Bradley

Councillor G. Halbert

Councillor E. Rothwell

Non-Council Members:

Miss M. Lees

Miss F. Brierley

Mr. T. E. C. Crozier

Miss E. Goode

M. Strang, Esq., M.B., Ch.B.

Mrs. P. Dunkerley.

AMBULANCE SUB-COMMITTEE

Chairman:

Councillor G. Halbert

The Mayor

Councillor J. Bradley

Alderman S. T. Marron, J.P.

Councillor D. C. Hanson

Councillor E. Rothwell

MENTAL HEALTH SUB-COMMITTEE

Chairman:

Councillor J. A. Arthurs, J.P.

The Mayor

Councillor G. Halbert

Alderman S. T. Marron, J.P.

Councillor D. C. Hanson

Councillor J. Bradley

Councillor E. Rothwell

Non-Council Members:

Miss I. M. Brislee

Alderman F. Lord, O.B.E., J.P.

Rev. G. R. Lloyd

Mrs. G. Morrell, J.P.

STAFF

THE PUBLIC HEALTH DEPARTMENT

Medical Officer of Health and School Medical Officer:—

J. T. Chalmers Keddie, M.B., Ch.B., D.P.H.

Senior Medical Officers of Health and Senior School Medical Officers:

John Starkie, M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H.

Alexander P. Buchan, M.B., Ch.B., D.P.H. (to 4-12-51)

Assistant Medical Officers of Health and Assistant School Medical Officers:

Edna Circuitt, M.B., Ch.B., D.P.H.

Andrew P. Curran, B.Sc., M.B., Ch.B., D.P.H. (to 17-5-51)

Walter P. B. Stonehouse, M.R.C.S., L.R.C.P., D.P.H.

Senior Dental Officer:

James Fenton, L.D.S.

Assistant Dental Officers:

David J. Franks, L.D.S.

Joseph H. Woolley, L.D.S.

Consultants:

A. H. Barber, M.A., M.B., Ch.B., F.R.C.S., M.R.C.P. *Obstetrician*

R. M. Maher, B.Sc., M.D., B.S., M.R.C.P. *Physician*

Arthur Pool, M.B., Ch.B., M.R.C.P., D.P.M. *Psychiatrist*

G. S. Robertson, M.B., Ch.B. *Mental Deficiency*

Chest Physician:

Henry S. Bagshaw, M.B., Ch.B., D.P.H.

Public Analyst:

S. Ernest Melling, M.Sc., F.R.I.C.

Deputy Public Analyst:

T. W. Lovett, F.R.I.C.

Chief Sanitary Inspector:

Harold V. Cass

Deputy Chief Sanitary Inspector:

John Brook

Sanitary Inspectors:

J. Crosdale, J. McKenna, H. Shaw, E. C. Elford, D. Eckersley,

T. Boardman, D. G. Russell, L. Moorhouse (to 29-7-51),

S. Robinson (to 7-8-51), J. Smith (from 8-8-51), A. Renshaw

(from 2-8-51)

Lay Administrative Officer:

T. P. McKniff

Chief Clerk:

Miss M. Royle

Ambulance Officer:

W. E. Cooke (to 30-4-51)
E. G. Crapper (from 11-6-51)

*Mental Health Visitors
and Duly Authorised Officers:*

Albert White (Senior), Miss J. H. Pick, B.A.,
Dennis G. Pickles, B.A. (Cantab)

Mental Health Visitors:

J. B. Dearnaley, B.A. (from 17-9-51), Miss B. Butterworth (from 1-9-51)

Supervisor of Occupation Centre:

Mrs. J. L. Worfolk

*Superintendent Health Visitor
and Superintendent School Nurse:*

Mrs. C. Houghton

*Deputy Superintendent Health Visitor
and Deputy Superintendent School Nurse:*

Miss I. Watson (to 21-10-51)

Health Visitors/School Nurses:

Miss A. W. Moordaff (Senior) (to 30-6-51), Miss C. Williamson (Senior
from 22-10-51), Mrs. H. Emmott, Mrs. E. E. Robinson, Mrs. C. Smith,
Miss C. Briggs, Miss M. Barnes, Miss E. J. Thompson, Miss M. Barker,
Miss M. E. Strain, Mrs. A. G. Willmott, Mrs. M. Griffiths (to 28-2-51),
Miss C. Poole (to 31-3-51)

School Nurse:

Miss E. E. Williams

Superintendent Nursery Teacher:

Mrs. J. A. A. Bracewell (to 31-12-50)
Mrs. M. T. Beech (from 2-7-51)

Lay Supervisor of Midwives:

Miss M. M. Nugent

Assistant Superintendents:

Miss B. Holland (Senior to 28-2-51)
Miss W. Lister (Senior from 1-4-51)

Municipal Midwives.

Miss B. Holland (from 1-3-51), Mrs. A. M. Walshe, Mrs. I. Hartley, Miss M. Bennett, Mrs. M. Barrett, Mrs. S. A. Pugh, Miss M. Foster, Mrs. E. Kidder, Mrs. N. Davies (from 1-3-51), Miss M. Lancaster (to 30-4-51), Miss J. L. Walker (to 31-3-51), Miss J. M. Livesey (to 31-3-51), Miss F. Chew (from 1-12-51), Miss M. E. Jones (from 1-12-51), Mrs. E. Lees (from 1-11-51), Mrs. E. C. McMahon (from 16-4-51)

Superintendent of District Nurses:

Miss C. Bonsall (deceased 16-12-51)

District Nurses:

Miss J. A. Baker, Miss A. A. Murray, Mrs. A. Schofield, Miss A. Tulley, Mrs. M. Eccles (to 31-8-51), Miss E. Bailey (from 1-1-51), Miss W. Davies (from 5-11-51), Miss H. Hollinshead (from 18-6-51), Mr. F. P. Earnshaw, Mr. E. L. Taylor, Mr. S. Harrop.

Domestic Help Organiser:

Mrs. M. McGough

SUMMARY OF STATISTICS

General Statistics

Area in Statute Acres	5,340	
Enumerated Population (1951 census)	121,212	
Registrar General's Estimate of Population (middle of 1951) ...	119,450	
Density of Population, i.e., number of persons per acre (whole Borough)		22.4
Number of Houses in the Borough, December, 1951 :—		
(a) Permanent	41,538	
(b) Temporary (prefabricated)	350	
	—	41,888
Number of new houses erected in 1951 :—		
(a) Permanent :		
(i) by local authority	220	
(ii) by other bodies or persons	21	
	—	241
(b) Temporary (prefabricated) :		
(i) by local authority	—	
(ii) by other bodies or persons	—	
	—	—
Rateable Value (1st April, 1951)	£704,451	
Sum represented by a Penny Rate (March, 1951)	£2,819	
Total number of persons on doctors' lists in the Borough at 31-12-51	121,946	
Number of marriages during 1951	1,055	
Persons married per thousand of population		8.83

Extracts from Vital Statistics

Live Births (Males 1,011; Females 928)	1,939
Birth rate per 1,000 of estimated population	16.23
Stillbirths (Males 31; Females 20)	51
Stillbirths rate per 1,000 births	25.63
Deaths (Males 901; Females 897)	1,798
Death rate per 1,000 of estimated population	15.05
Maternal Deaths	1
Maternal Mortality Rate per 1,000 births	0.50
Deaths of Infants under one year	79
Infant Mortality rate per 1,000 live births	40.74
Other Death Rates per 1,000 of estimated population—	
Tuberculosis :	
(a) All forms	0.31
(b) Pulmonary	0.27
Other respiratory diseases	2.77
Cancer	1.87
Smallpox, Enteric Fever, Measles, Scarlet Fever, Whooping Cough and Diphtheria	0.01

SECTION I

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

Oldham is situated in the County of Lancashire on the south-western slopes of the Pennines. Its highest point is 1,225ft. and its lowest 350ft. above sea level.

Cotton spinning and textile engineering are the main industries. Other industries include the manufacture of radio and other electrical equipment. There are numerous light industries now established in the town, manufacture of bedding, leather goods, biscuits, etc. There is one colliery in the town and one on the Borough boundary.

The Oldham Extension Act, 1950, came into operation on the 1st April and altered the boundaries between the Borough of Oldham and the Limehurst Rural District in such a way as to include in the Borough properties which were formerly in the area of the Rural District. The added area, containing 605 acres, includes parts of the parishes of Alt, Bardsley and Woodhouses.

The number of houses in the added area on 1st April was 468 and the estimated population was 2,047. Electricity is provided by the North West Division of the British Electricity Authority, and gas by the Oldham Undertaking of the North Western Gas Board. With regard to water supply the greater part is in the area of the Ashton-under-Lyne, Stalybridge and Dukinfield District Waterworks Joint Committee. Portions of the Limeside and Fitton Hill Estates, together with the Holts Estate are in the area of supply of the Oldham Corporation Water Undertaking.

The extension has primarily been granted because of the housing needs of the Borough and when the added areas have been fully developed it is anticipated that over 3,000 houses will have been provided. The Housing Department have already built and are building houses in part of the Limeside area which is affected by the extension.

Area and Population

The area of the Borough on 1st January was 4,735 statute acres. On the 1st April, when the Oldham Extension Act, 1950, became operative, it was 5,340 statute acres, and included parts of the parishes of Alt, Bardsley and Woodhouses, containing 605 acres in all. The Registrar General's estimate of the population of the Borough at the middle of 1951 is 119,450.

During the year another census, the fifteenth in the series which commenced in 1801, was taken and the preliminary report of the Registrar General gives the population of Oldham as 121,212 (males 57,068, females 64,144).

At the previous census (1931) the population of the Borough was 140,314 (males 66,141, females 74,173), and so the population has decreased in the intercensal years by 19,102 or 13.6 per cent of the 1931 census population. Oldham shares a decrease with seven other Lancashire County Boroughs.

Rateable Value

The rateable value on 1st April, 1951, was £704,451, and on the 31st March the sum represented by a penny rate £2,819 6s. 2.675d.

Unemployment

Trade was brisk with a heavy demand for labour in all industries, particularly for female labour in the cotton mills. In December, however, the first signs of a recession appeared in the textile industry. During Christmas week many mills had an extended stoppage for one week and a few for two weeks. This trade recession became marked in the New Year.

The figures shown in the table on page 13 are the number of persons, wholly unemployed or temporarily stopped, registered during each month of the year. These have been supplied by the Manager of the Employment Exchange.

UNEMPLOYED REGISTER
1st January to 31st December, 1951.

	WHOLLY UNEMPLOYED				TEMPORARILY STOPPED			
	Men 18 and over	Women 18 and over	Boys under 18	Girls under 18	Men 18 and over	Women 18 and over	Boys under 18	Girls under 18
15th January, 1951	226	50	6	3	5	5	—	—
12th February, "	195	51	3	4	5	6	—	—
12th March, "	170	38	6	3	4	6	—	—
16th April, ,	133	45	7	3	4	—	—	—
21st May, ,	130	41	3	2	5	1	—	—
18th June, "	128	21	1	1	4	—	—	—
16th July, "	107	48	4	4	5	2	—	—
13th August, "	96	40	6	—	5	10	—	—
17th September, "	106	45	7	4	4	7	—	—
15th October, "	92	83	3	3	3	17	—	2
12th November, "	90	81	5	1	1	17	—	—
10th December, "	104	74	4	2	24	35	1	1

NOTE.—The boundary of the area of the Oldham Employment Exchange is not identical with that of the Oldham Borough. The figures quoted may include non-resident persons registering in Oldham, and may exclude Oldham residents registering elsewhere.

VITAL STATISTICS

Births

Births Registered

(a) LIVE BIRTHS :

There were 2,913 live births (1,492 males and 1,421 females) registered in the Borough during the year. After correction for inward (62) and outward (1,036) transferable births, the net total of births is 1,939 (1,011 males and 928 females). The illegitimate live births numbered 108 or 5.57 per cent of the total live births.

(b) STILLBIRTHS :

During the year 65 stillbirths were registered. After being adjusted by inward and outward transfers, the number is 51.

Births Notified

During the year 1,919 notifications of births were received relating to 1,870 live births and 49 stillbirths. In addition, 1,035 notifications were received which were transferred to other authorities concerned. The 2,954 live and stillbirths were notified by:—

Midwives	2,954
Doctors	—

Marriages

There were 1,055 marriages during the year, the rate per thousand of the population being 8.83. In 1950 the number of marriages was 1,135.

Deaths

During the year 2,139 deaths (1,065 males and 1,074 females) were registered in the Borough. After correction for inward (112) and outward (453) transferable deaths, the net total deaths is 1,798 (901 males and 897 females), an increase of 80 on the total for 1950.

Of the 1,798 deaths, 594 (or 33.04 per cent) occurred in one or other of the following institutions:—

Boundary Park General Hospital	197
Boundary Park General Hospital Annexe	191
Oldham Royal Infirmary	116
Westhulme Hospital	3
Strinesdale Sanatorium	9
Dr. Kershaw's Cottage Hospital	5
St. Joseph's Hospital, Manchester	3
Manchester Royal Infirmary	5
Salford Royal Infirmary	3
Hope Hospital, Salford	2
Christie's Hospital	2
Royal Manchester Children's Hospital, Pendlebury ...	2
Crumpsall Hospital, Manchester	14
Northern Hospital, Manchester	1
Manchester Royal Eye Hospital	1
St. Mary's Hospital, Manchester	1

Manchester Victoria Memorial Jewish Hospital	1
District Infirmary, Ashton-under-Lyne	1
Lake Hospital, Ashton-under-Lyne	3
Birch Hill Hospital, Rochdale	5
Rochdale Infirmary	3
Mental Hospitals	13
Mental Deficiency Hospitals	1
Peel Hall Pulmonary Hospital	1
Wolstenholme Pulmonary Hospital	1
Other Hospitals	10

Of the total deaths, 1,140 (or 63.96 per cent) occurred in persons aged 65 years or over.

The following are the chief causes of death in accordance with the International Statistical Classification of Diseases, Injuries and Causes of Death, 1948:—

Tuberculosis	37
Malignant and Lymphatic Neoplasms	224
Vascular Lesions of Nervous System	201
Coronary Disease, Angina	134
Hypertension with Heart Disease	57
Other Heart Disease	363
Other Circulatory Disease	75
Pneumonia	83
Bronchitis	235
Suicide	25
Motor Vehicle, other accidents, homicide and operations of war	49

These groups of diseases represent 1,483 deaths occurring during the year, or 82.48 per cent of the total deaths registered.

Maternal Mortality

During the year only one death was directly attributed to pregnancy, childbirth or abortion, and the maternal mortality rate was 0.50 per thousand live and stillbirths. This rate compares with 0.52 for the previous year when one death was recorded.

The following are details of the one maternal death that occurred during the year:—

Case No. 1. Age 31 years.

Cause of death—

I (a) Cæsarean Section.

(b) Paralytic Ileus.

Infantile Mortality

There were 102 deaths (57 males and 45 females) of infants under one year of age registered in the Borough. After correction for inward (6) and outward (29) transferable deaths, the net total of infant deaths is 79 (49 males and 30 females), an increase of 13 on the total for 1950. Of the 79 infant deaths, five were those of illegitimate children and 46 occurred in infants under four weeks old, equivalent to a neo-natal mortality of 23.72 per 1,000 births.

The following table shows the neo-natal and infantile mortality during the last five years, together with five-year averages from 1936:—

Year	Infant Deaths under 1 month	Neo-Natal Mortality rate per 1,000 births	Infant Deaths under 1 year	Infantile Mortality rate per 1,000 births
Average 5 yrs.—1936-1940	58	35.15	107	65.81
Average 5 yrs.—1941-1945	47	25.60	107	59.01
1946	47	22.05	92	43.15
1947	69	26.45	147	58.03
1948	55	24.57	104	46.47
1949	51	25.94	82	41.71
1950	35	18.73	66	35.31
Average 5 yrs.—1946-1950	51	23.55	98	44.93
1951	46	23.72	79	40.74

Table of Causes of Death at different periods of life during the year, 1951.

CAUSES OF DEATH	Sex	All Ages	0-	1-	2-	5-	15-	25-	35-	45-	55-	65-	75+
ALL CAUSES	M	901	49	4	3	6	3	16	31	97	167	284	241
	F	897	30	1	3	5	8	12	25	57	141	282	333
1 Tuberculosis—Respiratory ...	M	6	...	...	1	...	...	2	5	10	4	4	...
	F	26	...	...	...	1	1	...	2	...	...	1	1
2 Tuberculosis—Other forms ...	M	1	...	...	...	...	...	...	1	...	...	...	...
	F	4	...	...	...	1	...	1	...	1	...	...	1
3 Syphilitic Disease	M	3	...	...	...	...	...	...	...	1	1	1	...
	F	1	...	...	...	...	...	...	...	...	1	...	...
4 Diphtheria	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
5 Whooping Cough	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
6 Meningococcal Infections ...	M	1	...	1	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
7 Acute Poliomyelitis	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
8 Measles	M	1	...	1	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
9 Other Infective and Parasitic Diseases	M	3	...	...	...	...	...	1	1	...	...	1	...
	F	4	1	...	...	...	...	...	1	...	1	1	...
10 Malignant Neoplasm—Stomach	M	29	...	...	...	...	...	...	2	7	7	7	6
	F	21	...	...	...	...	1	...	2	1	1	11	5
11 Malignant Neoplasm—Lung	M	21	...	...	...	...	...	...	1	5	11	4	...
Bronchus	F	5	...	...	...	...	1	...	...	2	1	1	...
12 Malignant Neoplasm—Breast	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	19	...	...	...	...	...	...	2	2	3	5	7
13 Malignant Neoplasm—Uterus	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	15	...	...	...	...	...	...	...	3	9	2	1
14 Other Malignant and Lymphatic Neoplasms	M	59	...	...	...	...	...	...	...	7	10	24	18
	F	55	1	...	2	...	...	...	3	7	6	21	15
15 Leukaemia, Aleukaemia ...	M	3	...	...	...	1	...	...	...	...	...	2	...
	F	1	...	...	...	...	...	...	...	...	...	1	...
16 Diabetes	M	1	...	...	...	...	...	...	...	...	...	1	...
	F	6	...	...	...	...	...	...	...	...	2	3	1
17 Vascular Lesions of Nervous System	M	76	...	...	...	...	...	...	1	8	10	31	26
	F	125	...	...	...	...	1	...	2	3	27	36	56
18 Coronary Disease, Angina ...	M	92	...	...	...	...	...	...	2	12	28	31	19
	F	42	...	...	...	...	...	...	1	4	8	17	12
19 Hypertension with Heart Disease	M	31	...	...	...	...	...	...	1	2	6	16	6
	F	26	...	...	...	...	...	...	1	4	6	7	8
20 Other Heart Disease	M	149	...	...	...	...	...	5	5	4	19	46	70
	F	214	...	...	...	...	...	4	6	9	17	74	104
21 Other Circulatory Disease ...	M	38	...	...	...	...	...	...	...	3	3	10	22
	F	37	...	...	...	...	...	...	...	2	6	14	15
22 Influenza	M	23	...	...	...	...	...	1	...	3	4	9	6
	F	24	...	...	...	...	...	...	...	1	4	12	7
23 Pneumonia	M	46	7	...	...	...	...	...	2	...	11	13	13
	F	37	8	1	1	1	...	...	1	1	7	4	13
24 Bronchitis	M	128	2	...	1	...	...	...	3	18	30	51	23
	F	107	...	...	...	...	...	...	2	7	18	35	45
25 Other Diseases of Respiratory System	M	11	1	...	...	...	...	...	...	1	4	5	...
	F	2	...	...	...	...	1	...	...	...	...	1	...
26 Ulcer of Stomach and Duodenum	M	9	...	...	...	...	...	...	...	2	1	4	2
	F	3	...	...	...	...	...	...	...	...	2	1	...
27 Gastritis, Enteritis & Diarrhoea	M	2	2	...	...	...	...	...	...	...	...	...	...
	F	9	4	...	...	...	...	...	...	1	2	1	1
28 Nephritis and Nephrosis ...	M	5	...	...	...	...	...	1	...	1	...	2	1
	F	10	...	...	...	...	...	2	...	1	2	3	2
29 Hyperplasia of Prostate ...	M	16	...	...	...	...	...	...	1	...	1	7	7
	F	...	...	...	...	...	...	...	...	...	...	...	...
30 Pregnancy, Childbirth, Abortion	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	1	...	...	...	...	...	1	...	...	...	...	...
31 Congenital Malformation ...	M	10	7	1	...	...	...	1	...	...	1	...	...
	F	1	1	...	...	...	...	...	...	...	...	...	...
32 Other Defined and Ill-defined Diseases	M	76	27	1	...	...	2	2	4	7	13	6	14
	F	89	14	...	...	...	2	4	2	6	13	20	28
33 Motor Vehicle Accidents ...	M	11	...	...	1	5	...	...	1	2	1	1	...
	F	3	...	...	...	...	...	...	...	...	...	3	...
34 All other Accidents	M	12	2	...	...	...	...	1	...	...	1	2	6
	F	22	1	...	...	2	1	...	...	...	4	6	8
35 Suicide	M	17	...	...	...	...	1	2	1	4	1	6	2
	F	8	...	...	...	...	...	...	...	2	1	2	3
36 Homicide and Operations of War	M	1	1	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...

INFANTILE MORTALITY DURING 1951
Deaths from stated causes and various ages under one year.

CAUSE OF DEATH	Under 1 day	1—2 days	2—3 days	3—4 days	4—5 days	5—6 days	6—7 days	Total under 1 week	1—2 weeks	2—3 weeks	3—4 weeks	Total under 1 month	1—3 months	3—6 months	6—9 months	9—12 months	Total under 1 year
ALL CAUSES—Certified ...	16	6	3	8	3	2	...	38	3	4	1	46	14	13	5	1	79
Uncertified	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Bronchitis ...	...	...	...	...	...	...	...	...	...	...	...	...	1	6	...	...	2
Broncho-Pneumonia ...	...	...	...	...	...	...	...	...	...	...	...	...	4	1	2	1	13
Pneumonia ...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	2
Broncho-Pneumonia (Infanticide)	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	1
Pneumonia of new-born ...	...	...	...	...	...	2	...	2	...	1	...	3	...	...	...	...	3
Injury at birth ...	2	5	1	1	...	...	...	9	...	1	...	10	...	...	...	...	10
Premature Birth ...	6	...	...	4	2	...	...	12	...	...	...	12	1	...	...	...	13
Congenital Malformations ...	1	1	...	...	1	...	...	3	2	...	1	5	1	...	...	...	6
Congenital Heart Disease ...	...	...	...	...	...	...	...	1	...	...	1	2	1	...	...	...	3
Atelectasis ...	4	...	2	2	...	...	...	8	1	...	...	9	...	...	...	...	9
Diarrhoea and Enteritis ...	...	...	...	...	...	...	...	...	...	...	...	...	3	1	2	...	6
Icterus Gravis of new-born ...	2	...	...	...	...	...	...	2	...	...	...	2	...	...	...	...	2
Haemolytic Disease of new-born ...	1	...	...	...	...	...	...	1	...	...	...	1	...	...	...	...	1
Myosarcoma ...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1
Accidental Death (Asphyxia)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Other Causes ...	...	...	...	...	...	...	...	...	...	1	...	...	...	3	1	...	3
TOTALS ...	16	6	3	8	3	2	...	38	3	4	1	46	14	13	5	1	79

VITAL STATISTICS FOR THE BOROUGH FOR THE YEAR AND PREVIOUS YEARS.

YEAR	Popula- tion estimated to middle of each year	BIRTHS			Total deaths regis- tered in the Borough	Transferable Deaths		Nett Deaths after correction			
		Births Regis- tered	Nett after correction			Of non- residents regis- tered in the Borough	Of resi- dents not regis- tered in the Borough	At all ages		Under 1 year	
			Number	Rate				Number	Rate	Number	Rate per 1,000 nett births
1931-1940 Average 10 years	—	2030	1698	12.9	2322	400	73	1962	14.9	124	72
1941	116,860	2317	1649	14.11	2376	533	86	1929	16.50	107	64
1942	114,300	2576	1707	14.93	2163	513	65	1715	15.00	110	64
1943	112,300	2885	1845	16.43	2292	542	77	1827	16.27	114	61
1944	112,700	3268	2023	18.03	2168	525	83	1726	15.39	108	53
1945	111,350	2911	1899	17.05	2145	486	71	1730	15.54	96	50
1946	116,240	3420	2132	18.34	2148	525	70	1693	14.56	92	43
1947	117,900	4076	2533	21.48	2213	524	74	1763	14.95	147	58
1948	120,600	3477	2238	18.56	2146	516	60	1690	14.01	104	46
1949	120,600	2950	1966	16.30	2302	562	59	1799	14.92	82	42
1950	119,500	2946	1869	15.64	2114	503	107	1718	14.38	66	35
Average 10 years 1941-1950	—	3083	1986	17.09	2207	530	75	1759	15.15	103	52
1951	119,450	2913	1939	16.23	2139	453	112	1798	15.05	79	41

COMPARATIVE STATEMENT OF VITAL STATISTICS FOR THE YEAR 1951.

	Birth Rate	Death Rate	Infantile Mortality Rate		Death Rate from Phthisis	Death Rate from other Tubercular Diseases	Maternal Mortality Rate (per 1,000 total live and stillbirths).						
			Year 1951	Average Five Years 1946-1950			Sepsis of Preg-nancy	Abortion with Toxaemia and other Toxaemias of Pregnancy	Haemor-rhage of Preg-nancy	Abortion without Sepsis or Toxaemia	Abortion with Sepsis	Other complica-tions of Pregnancy	Total
England & Wales	15.5	12.5	29.6	36	*	*	.10	.24	.13	.05	.09	.18	.79
126 Great Towns	17.3	13.4	33.9	40.6	*	*	*	*	*	*	*	*	*
Birkenhead	18.2	14.2	40	55	.45	.05	...	...	.74	...	...	.37	1.11
Burnley	14.88	17.20	33	47	.35	.06	...	...	...	...	...	...	Nil
Bury	14.35	15.84	37	42	.13	.03	...	...	...	...	...	1.17	1.17
Halifax	15.5	15.16	28	35	.27	.03	...	...	...	...	...	...	Nil
Liverpool	19.9	13.6	35	56	.52	.05	.12	...	...	...	...	.50	.62
Manchester	17.77	13.82	35	48	.45	.06	.31	.31	.16	.24	.08	.39	1.49
Oldham	16.23	15.05	41	45	.27	.04	...	..	...	...	...	.50	.50
Preston	16.61	15.38	35	46	.35	.04	...	1.00	...	...	...	.49	1.49
Rochdale	14.6	16.7	54	46	.26	.04	...	...	...	...	...	.76	.76
Salford	17.48	19.98	35	50	.49	.03	...	...	.63	...	...	.31	.94
Stockport	14.66	14.66	41	39	.28	.07	...	...	.47	...	.47	.47	1.41
Wallasey	16.78	14.95	32	40	.32	.04	...	.57	...	...	...	.57	1.14
Wigan	15.79	14.54	44	53	.42	.01	.73	...	...	...	...	...	.73

* Not available

SECTION II

HOSPITAL AND SPECIALIST SERVICES **MANCHESTER REGIONAL HOSPITAL BOARD**

The hospital and specialist services are provided through the Manchester Regional Hospital Board. It is the policy of the Board to provide a fully specialised service, and such a service is being built up.

The Board have appointed Consultants to the Oldham Hospital Group in almost all the major specialities and have made new and additional appointments during the year. Additional posts were created in medicine, surgery, gynæcology and obstetrics, pædiatrics, and dental surgery, and appointments were made by the Board during the year.

A domiciliary specialist service has been established by the Board to assist the family doctor and the patient, when the patient's condition makes it impossible for him or her to be referred to the out-patient or in-patient departments of a hospital for diagnosis or treatment. All practitioners are fully aware of the facilities available.

Alderman S. T. Marron, J.P., F.C.C.S., Chairman of the Health Committee, is a member of the Board, having been appointed by the Minister for a period of three years ending 31st March, 1952.

UNITED MANCHESTER HOSPITALS

This is the designated teaching group for the area and comprises the following:—

Manchester Royal Infirmary,
The Manchester Royal Eye Hospital,
St. Mary's Hospitals for Women and Children,
The Dental Hospital of Manchester,
The Manchester Foot Hospital.

These hospitals and other hospitals in the Manchester and Salford area are utilised by Oldham residents for the more specialised services.

Councillor G. Halbert, Deputy Chairman of the Health Committee, is a member of the Board of Governors, having been re-appointed by the Minister for a period of three years, ending 31st March, 1953.

OLDHAM AND DISTRICT HOSPITAL MANAGEMENT COMMITTEE.

GROUP 11

Alderman F. Lord, O.B.E., J.P., Chairman of the Oldham and District Hospital Management Committee, and Councillor G. Halbert, who had been appointed as members of the Committee for the period ended 31st March, 1951, were re-appointed.

The following members of the Local Health Authority are members of the Management Committee:—

For the period ending:

31st March, 1952—Alderman S. T. Marron, J.P., F.C.C.S.

31st March, 1953—Alderman A. Hallwood,

Alderman A. Tweedale.

31st March, 1954—Alderman F. Lord, O.B.E., J.P. (Chairman),
Councillor G. Halbert.

I am indebted to Mr. F. W. Barnett, Secretary of the Oldham and District Hospital Management Committee, for the details contained in the following report:—

The Oldham and District Hospital Management Committee is responsible for the following hospitals, dispensaries and clinics, and as the agent of the Manchester Regional Hospital Board, undertakes their day to day administration:

Oldham Royal Infirmary: This is a general hospital of 200 beds with surgical, orthopædic, ophthalmic and aural beds, a limited number of medical and gynæcological beds and a children's ward. There is a rehabilitation unit associated with the orthopædic department to which other cases can also be referred.

Boundary Park General Hospital: This is a general hospital of 390 beds with medical, surgical, pædiatric and gynæcological beds, an ante-natal clinic, and a large maternity unit. A treatment centre is provided for the diagnosis and treatment of venereal diseases.

There were eight beds available in the hospital for private patients. In the maternity unit there are 16 amenity beds, patients being charged 6/- per day for a single-bedded ward, and 3/- per day for beds in other wards.

Boundary Park General Hospital Annexe: The premises comprising the Boundary Park General Hospital Annexe were formerly the Westwood Park Institution. Part of the accommodation has been designated for hospital use and provides 372 beds for the chronic sick and 224 beds for psychiatric cases. Certain premises unsuited for hospital purposes continue to be used by the Welfare Services Committee to provide accommodation under Part III of the National Assistance Act.

The Strinesdale Sanatorium: The Sanatorium provides accommodation for 57 patients suffering from pulmonary tuberculosis—55 being in the main ward and two in separate chalets.

The Racefield Hospital, Chadderton: This hospital, which is situated in Chadderton, provides 52 beds for female patients suffering from pulmonary tuberculosis.

Westhulme Hospital: This hospital provides accommodation for patients suffering from infectious diseases. According to Ministry of Health standards the accommodation available is 85 beds.

Throughout the year only two wards, with a total accommodation of 43 beds, and a cubicle ward of fourteen beds were in use.

The Woodfield Maternity Home: This is a general practitioner maternity home with twenty amenity beds, patients being charged 6/- per day for a single-bedded ward, and 3/- per day for beds in other wards.

Dr. Kershaw's Cottage Hospital, Royton: This is a general practitioner hospital situated in Royton and provides accommodation for 20 patients.

The Chest Clinic, Barker Street: These premises are available for the use of Oldham and Saddleworth patients. Patients continue to be referred to Boundary Park General Hospital for X-ray examinations.

The Dispensary, Brook Street, Chadderton: This dispensary is situated in Chadderton and is used by patients from the adjacent county areas.

The Orthopædic Clinic, Gainsborough Avenue: This clinic also provides facilities for physiotherapy and artificial sunlight. Cases are referred for treatment from the school clinics, child welfare centres and by private practitioners.

THE HARGRAVES CONVALESCENT HOME

This home, providing 28 beds, usually known as "The Nook," is situated in Saddleworth and is administered by the Huddersfield Hospital Management Committee, 21 beds being available for patients from the Oldham hospitals.

EMERGENCY MATERNITY UNIT

An Emergency Maternity Unit operates from Boundary Park General Hospital and is available to all general practitioners in the area.

PATHOLOGICAL SERVICES

The majority of the pathological and bacteriological work of the Public Health Department is undertaken in the laboratories at Boundary Park General Hospital and Oldham Royal Infirmary. Certain examinations, e.g., ice cream and water, are undertaken by the Public Health Laboratory Service at the Public Health Laboratory, Monsall Hospital, Manchester.

NURSING HOMES

There are no registered nursing homes in the Borough.

OLDHAM AND DISTRICT HEALTH SERVICES

CONTRIBUTORY ASSOCIATION

The following information is given by courtesy of Mr. Edgar Ormerod, Secretary Administrator of the Association:—

The Oldham and District Health Services Contributory Association is a voluntary association whose object is to enable contributors to provide by means of a small weekly payment, convalescent treatment, physiotherapy in the home and also to obtain financial assistance towards expenses for surgical appliances, dentures, optics and the like. Assistance is also given towards payment for domestic help, prevention of illness, care and after-care, and the provision of sick room and invalid equipment. There is no income limit for contributors. The rates of contribution are 1d. per week for a single person and 2d. per week for a married person. Such contribution entitles the member, his wife, and his or her children up to school-leaving age, to receive the benefits of the scheme, but does not entitle any other person or persons dependent on the member to receive the benefits. Such persons may become members of the scheme by payment of the recognised contribution.

During the year the Association provided the following benefits to members resident in the Borough and the adjacent districts:—

Mobile Physiotherapy Service	437
Convalescent Home Service	289
Sick Room Perquisites—articles loaned	596
Optical Benefits—claims	1126
Surgical Appliances—grants	127
Dental—claims	122
Domestic Help—refunds	18

**AMBULANCE SERVICE, HOME NURSING SERVICE, MIDWIVES
SERVICE, MENTAL HEALTH SERVICE**

These services are provided by the Local Health Authority and are fully described elsewhere in this Report.

SECTION III

LOCAL HEALTH AUTHORITY SERVICES

HEALTH CENTRES

(Section 21)

The Health Committee have appointed a Special Committee to advise on all matters in connection with Health Centres. The Special Committee consists of eleven members (six Council members of the Health Committee; one member of the Oldham Executive Council; one member of the Oldham Medical Committee; one member of the Oldham Dental Committee; one member of the Oldham Optical Committee; and one member of the Oldham Pharmaceutical Committee). In order that the views of the medical profession may be fully represented the Health Committee have agreed that two additional representatives nominated by the Oldham Medical Committee may attend meetings of the Special Committee in an advisory capacity only and without power to vote.

The Special Committee met during the year and gave further consideration to the provision of a large health centre in the centre of the town on the West Street site adjacent to the proposed new Public Health Offices, and received the views of the professional bodies on this suggestion.

The Oldham Medical Committee considered the West Street site would be a good location for an experimental Health Centre, but the proposed Health Centre should only serve the central area of the town and further discussions should take place with a view to siting additional Health Centres in other areas of the town. The Oldham Dental Committee approved of the centralising of dental clinic services. The Oldham Pharmaceutical Committee expressed the view that there was no necessity for fully-equipped dispensaries in Health Centres and considered that the distribution of chemists' shops in the town was such that a person in any part of the town was able to obtain medicines and appliances without any effort and provision was made for the dispensing of prescriptions outside normal hours of business.

The professional bodies were requested to submit suggestions and their views as to the location of Health Centres in other parts of the town and the accommodation which they considered necessary to be provided in the two types of Health Centre.

The Health Committee agreed in principle to the proposal for a large new Health Centre on the West Street site.

CARE OF MOTHERS AND YOUNG CHILDREN

(Section 22)

Ante-Natal and Post-Natal Clinics

Ante-Natal Clinics are held at the Central Clinic, 29, Queen Street, each afternoon from Monday to Friday with the exception of Wednesday afternoon when new cases attend for booking and examination by the midwife. A Medical Officer attends each session fortnightly. No clinics are held in the homes of the midwives.

Every opportunity is taken to advise expectant mothers of all aspects of ante-natal and post-natal care and lectures and talks are arranged by the Supervisor of Midwives. The advantages of gas and air analgesia are fully explained and one apparatus is available at the clinic for demonstration purposes.

A post-natal clinic is held weekly on Thursday mornings, attendance being by appointment. The Consultant Obstetrician, Mr. A. H. Barber, attends a special clinic on alternate Wednesday mornings to see cases referred for specialist advice or treatment from the ante-natal and post-natal clinics.

By arrangement with the Principal of the Women's Institute, which is under the control of the Education Committee, a sewing teacher attends the booking session each week to instruct mothers in the making and repairing of children's clothing.

The following table gives details of the sessions held and attendances made at the clinics:—

	No. of Clinics provided at end of year	No. of sessions held per month	No. of women who attended during the year	Total number of attendances made by these women
Ante-Natal Clinics	1	22	1007	5300
Post-Natal Clinics	1	4	288	304

Relaxation Exercises

A special class in association with the ante-natal clinics is held weekly each Wednesday evening. A fully qualified physiotherapist attends each class.

Provision of Maternity Outfits

Maternity outfits, sterilized and packed ready for use, are available free to expectant mothers whether or not they have booked a municipal midwife for their confinement and can be obtained from the ante-natal clinic.

Dental Inspection and Treatment

Special arrangements exist for the dental care of expectant and nursing mothers and young children, and by agreement with the Education Committee, the resources of the School Dental Service are available on a user basis. The Senior Dental Officer, Mr. J. Fenton, L.D.S., under the direction of the Medical Officer of Health is responsible for the organisation and development of the Service and has direct access to the appropriate Sub-Committee. Expectant mothers attending for the first time at the ante-natal clinic are examined and if treatment is required, arrangements are made for this to be carried out at one of the dental clinics. Nursing mothers desiring treatment attend by appointment at one of the dental clinics for examination and any treatment required. Dentures of the prescribed type are supplied free of charge to expectant and nursing mothers.

Since the "Appointed Day" Mr. Fenton, with the full approval of the Education Committee has devoted three sessions per week to duties under the Oldham and District Hospital Management Committee. The Manchester Regional Hospital Board have now appointed Mr. Fenton Visiting Dental Officer and made a permanent contract with him for his services to continue with three sessions per week. As Visiting Dental Officer at the Boundary Park General Hospital he is able to admit and treat mothers and young children who require hospital facilities. This provides the closest link between the preventive and curative services and is of the greatest benefit to the patient, the Local Health Authority and hospital.

I am indebted to Mr. James Fenton, Senior Dental Officer, for the following report:—

Expectant and Nursing Mothers

The dental service provided for expectant and nursing mothers has been maintained as in the previous year and has suffered no deterioration such as many authorities have experienced through a shortage or complete lack of staff.

A fully comprehensive dental service has been provided and is readily available to all expectant and nursing mothers. Every effort is made to encourage these patients to retain their natural teeth but many are apathetic when conservation treatment is suggested. Far too many of these young women are only too keen to have total extractions and dentures fitted. Needless to say total extractions are limited to those cases where their general health would suffer as a result of retaining unhealthy teeth. Examination of large numbers of these patients at the ante-natal clinics reveals little evidence of previous treatment other than the extraction of teeth and on enquiry it is found that very few attend any dentist regularly for routine examination and treatment. All this leads to the conclusion that there is a gross lack of dental education amongst young adults. The dental staff experience difficulty in persuading many of these patients that absence of pain does not necessarily mean that treatment is not required. It is now easier to obtain emergency treatment through the General Dental Practitioner Service should trouble arise and it is the view that this factor influences some patients when treatment is offered and not accepted.

Inspection.—Regular weekly visits have been made to the Boundary Park General Hospital and Queen Street Ante-Natal Clinics. A full dental inspection is arranged for all new cases and treatment, if required, is offered to those patients who do not signify a preference to attend a dental practitioner of their own choice.

During the year, 1,326 patients were inspected and it is pleasing to record the ready co-operation of the medical and nursing staff and every encouragement is given to these patients to take advantage of the offer of treatment.

Treatment.—Details of the treatment carried out are given in the table below. Patients desiring treatment attend by appointment at one of the School Dental Clinics and where possible attendance at the Clinic nearest the home of the patient is arranged. Every effort is made to commence

treatment as soon as possible during pregnancy in order to allow the maximum amount of time should extensive treatment be necessary. During the year 1,017 attendances were made by the 313 patients treated.

There were 255 fillings inserted; every effort is made to encourage conservation treatment. In addition 152 scalings were performed. This operation is essential to maintain a healthy mouth.

A general anæsthetic was administered on 32 occasions when teeth were extracted. The services of Dr. G. Mason-Walshaw, the anæsthetist employed in the School Health Service, are utilised when required. The employment of a highly competent and experienced anæsthetist is essential in this work.

It was necessary for 76 patients to be supplied with dentures. The number of dentures supplied (119) is high considering the number of patients treated (313). Dentures are still supplied free through this service but since a charge has been made for dentures obtained through the General Dental Practitioner Service a number of patients have applied for their dentures through the Local Health Authority arrangements. For the construction of the dentures the services of a dental technician (mechanic) to the profession are used. This arrangement continues to prove most satisfactory.

X-ray facilities are essential for correct diagnosis and treatment and the X-ray unit at the Cannon Street Dental Clinic has again proved invaluable.

In cases where extensive treatment is required or treatment in hospital would be more beneficial, patients are referred to Boundary Park General Hospital and treatment is undertaken by the Senior Dental Officer in his capacity as Visiting Dental Officer.

Pre-School Children

During the year 254 children were brought for examination compared with 243 in the previous year.

The majority of these children were referred to the Clinics by the staffs of the Infant Welfare Centres. The parents are encouraged to attend for advice even if the children are not complaining of toothache, but unfortunately the majority do not seek advice until toothache has developed. This delay almost inevitably results in the extraction of teeth. The inspections revealed that many of these toddlers had commenced with dental caries which quite often was extensive. This state of affairs was also found to be present in many school entrants at their first routine school inspection.

A general anæsthetic is usually necessary when extractions have to be performed. Very young children are transferred to Boundary Park General Hospital as out-patients and the necessary treatment is undertaken by the Senior Dental Officer in his capacity as Visiting Dental Officer.

The following figures indicate the ages of the 254 children examined during the year:—

Under 1 year	1 year	2 years	3 years	4 years	5 years
1	15	24	89	122	3

Details of the work undertaken for expectant and nursing mothers and pre-school children are shown in the following tables:—

	Expectant and Nursing Mothers	Children under Five Yrs.
(a) Provided With Dental Care		
Examined	1326	272
Needing Treatment	862	260
Treated	313	257
Made Dentally Fit	282	250
(b) Dental Treatment Provided		
Extractions	417	591
Anæsthetics :		
Local	201	34
General	32	222
Fillings	255	69
Scalings or scaling and gum treatment ...	152	—
Silver Nitrate Treatment	—	29
Dressings	47	15
Radiographs	38	2
Dentures Provided :		
Complete	91	—
Partial	28	—

Care of Premature Infants

All infants weighing 5½lb. or less at birth are regarded as premature babies regardless of the period of gestation.

Premature infants born on the district, where the home conditions are unsatisfactory, are removed to hospital by ambulance in a special cot and are accompanied by the midwife. In other cases arrangements are made by the Supervisor of Midwives for the home nursing of these infants and, if necessary, suitable equipment is supplied. In the case of premature babies born in Boundary Park General Hospital or the Woodfield Maternity Home and discharged against medical advice or to unsatisfactory home conditions, the Almoner advises this Department and arrangements are made for follow-up and supervision.

One district midwife who has received special training undertakes full-time duties in connection with the nursing of premature babies. Where possible this midwife is in attendance at the confinement and continues in attendance until the baby weighs 6lbs. or the mother is able to care for the baby herself without supervision. She also attends all premature babies discharged from Boundary Park General Hospital and the Woodfield Maternity Home daily or more frequently if required.

There were 137 notifications received of births regarded as premature relating to Oldham residents (including transferred notifications) during the year:—

Born at home	37
Born in Nursing Homes or Maternity Homes	6
Born in Hospitals	94

The following table gives particulars of premature babies born alive at home during the year:—

	Trans- ferred to hospital	Nursed entirely at home					Grand Total
		Died in First 24 hrs.	Died on 2nd to 7th day	Died on 8th to 28th day	Sur- vived 28 days	Total	
2lbs. 3ozs. or less	2	—	—	—	—	—	2
Over 2lbs. 3ozs. up to & inc.							
3lbs. 4ozs. ..	—	1	2	—	1	4	4
Over 3lbs. 4ozs. up to & inc.							
4lbs. 6ozs. ..	—	—	1	—	3	4	4
Over 4lbs. 6ozs. up to & inc.							
4lbs. 15ozs. ..	1	1	—	—	10	11	12
Over 4lbs. 15ozs. up to & inc.							
5lbs. 8ozs. ..	—	—	—	1	14	15	15
Totals	3	2	3	1	28	34	37

Care of Unmarried Mothers and their Children

No Mother and Baby Home is provided, but full use is made of the services available through voluntary organisations and an annual grant of £100 is made to the Oldham Council for Moral Welfare, for which the services of their Social Worker are available.

Cases are referred to the Social Worker for investigation. She advises the expectant mother on all aspects of her problem and arranges admission to a suitable home or hostel where necessary. In certain cases where it has not been possible for her to make this provision through the homes available to her, the Department has made every endeavour to obtain suitable accommodation.

Under these arrangements provision was made for the accommodation of five cases and the full cost was met by the Health Committee, the following homes being used:—

Manchester and Salford Methodist Mission Maternity Home.

Mater Dei Hostel, Liverpool.

Liverpool Catholic Children's Protection Society Home, Liverpool.

Elmswood, Salvation Army Maternity Home, Liverpool.

Two cases were admitted to the Manchester and Salford Methodist Mission Maternity Home for ante-natal care, confinement, and post-natal care. A third case received ante-natal care in the Mater Dei Hostel but was confined in a hospital in the area. She received post-natal care at the Liverpool Catholic Children's Protection Society Home.

One case was admitted to a voluntary home for ante-natal care but took her discharge after a stay of two days and returned to her parents. She was subsequently admitted to Boundary Park General Hospital for her confinement.

One case was admitted to a voluntary home for ante-natal care but on admission had to be transferred to the Boundary Park General Hospital Annexe as a voluntary patient where she remained until her admission to the maternity unit for her confinement. She was subsequently transferred to Elmswood, Salvation Army Maternity Home, but again had to be removed to hospital on medical grounds.

In the following two cases it was not possible for suitable accommodation to be obtained:—

- (1) This case was admitted to Part III accommodation at the Boundary Park General Hospital Annexe five weeks prior to her confinement in the Boundary Park General Hospital. Efforts to obtain suitable post-natal accommodation were equally unsuccessful and after her confinement she returned to Part III accommodation where she remained for two months until she secured a residential post to which she could take her child.
- (2) This case arrived in the town a few days before her confinement and was admitted to Boundary Park General Hospital. Prior to discharge, her circumstances were referred to the Department, but at such short notice it was not possible to obtain suitable accommodation for post-natal care. She was, therefore, admitted to Part III accommodation at the Boundary Park General Hospital Annexe where she and her baby remained for eleven weeks, after which the baby was placed in a home and the mother returned to her previous place of residence.

Child Welfare Centres

A Child Welfare Centre is held at 29, Queen Street, twice weekly and there are seven branch Centres in church and school premises. Details of these Centres are as follows:—

Centre		Days	Times
Queen Street		Tuesday	9.30 a.m.
Queen Street		Friday	9.30 a.m.
Brunswick	Oxford Street	Wednesday	2.0 p.m.
Millgate	Hollins Road	Thursday	2.0 p.m.
Beulah	Withins Road	Tuesday	2.0 p.m.
Scottfield	off Ashton Road	Tuesday	2.0 p.m.
Scottfield	off Ashton Road	Friday	2.0 p.m.
St. Ambrose	Prince Charlie St.	Thursday	2.0 p.m.
St. Barnabas	Arundel Street	Tuesday	2.0 p.m.
Pitt St. East	off Glodwick Road	Wednesday	2.0 p.m.

The Friday afternoon session at the Scottfield Centre, which was not attended by a Medical Officer, was discontinued from the 16th March owing to shortage of Health Visitors. Up to the 3rd April the Beulah Centre continued to be held fortnightly, but after this date it was held weekly. With these exceptions a doctor was in attendance at each session.

Orange juice, cod liver oil, national dried milk and vitamins issued by the Ministry of Food are obtainable at all the Centres and certain proprietary brands of infant food can be purchased.

By arrangement with the Principal of the Women's Institute, which is under the control of the Education Committee, a sewing teacher attends the Centres on alternate weeks to advise mothers on the cutting out and sewing of children's clothing, patching, darning and how to "make do and mend" with clothes generally.

Clinic assistants are employed at the Centres in connection with the sale of food and to assist in the keeping of records, etc. This arrangement has proved most helpful and allows the health visitors to devote themselves fully to professional duties.

Attendances at Infant Welfare Centres during 1951

Centre	No. of Sessions	New Cases		Total Attendances	
		0-1	1-5	0-1	1-5
Queen Street	99	307	71	3975	882
Brunswick	50	161	24	2632	435
Millgate	51	152	40	1890	682
Beulah	48	68	32	1281	611
Scottfield	58	163	40	2608	495
St. Ambrose	51	160	32	2052	280
St. Barnabas	49	164	24	2824	814
Pitt Street East	51	163	20	2711	675

DAY NURSERIES

Municipal Day Nurseries

On the 1st January, Westhill, Overens Street, Horsedge, Tate Street, Honeywell Lane, and Haven Lane Nurseries were providing accommodation for 258 children.

In the previous year a proposal to provide additional accommodation for 26 children at Tate Street Nursery was submitted to the Ministry of Health. In May a communication was received stating that after careful consideration, and having regard to the high cost involved in comparison with the relatively small additional accommodation which would be provided, the Minister was unable to approve the proposed extension. The Maternity and Child Welfare Sub-Committee reluctantly accepted this decision.

In July, Miss Marjorie Lees on behalf of the Oldham Day Nursery Committee offered the Oldham Day Nursery as a gift to the Corporation for use as a day nursery or in the event of it no longer being required as such, for any other social welfare purpose the Health Committee may desire. The Maternity and Child Welfare Sub-Committee accepted the gift with thanks and instructed the Town Clerk to prepare the necessary documents. The transfer had not been formally completed by the end of the year.

In October, the Maternity and Child Welfare Sub-Committee approved a recommendation that the number of places at Horsedge day nursery should be reduced from 50 to 48.

The following accommodation was provided at the 31st December:—

Nursery	Age Groups			Total Places.
	0-1	1-2	2-5	
Westhill	5	15	25	45
Horsedge	8	15	25	48
Overens Street	4	8	25	37
Tate Street	—	13	21	34
Honeywell Lane	8	17	21	46
Haven Lane	8	17	21	46
	—	—	—	—
Totals	33	85	138	256
	—	—	—	—

During the year the charges for children attending the nurseries were under review, but no change was recommended. These charges, 2s. 3d. per day Monday to Friday and 1s. 6d. for Saturday morning, were adopted in 1950 following the receipt of Ministry of Health Circular 26/50.

All the nurseries are approved training schools for the training of nursery students for the National Nursery Examination Board Certificate. During the year twelve students were successful in obtaining this certificate.

By arrangement with the Oldham and District Hospital Management Committee the Westhill Nursery is approved by the General Nursing Council for the training of pupils entering the Group Enrolled Assistant Nurses Training Scheme. Pupils in their second year of training are required to spend eight weeks in the nursery and receive practical instruction in the care of healthy babies and young infants. No pupils were received during the year as none had completed their first year of training.

In January, Mrs. J. A. Bracewell, Superintendent Nursery Teacher, left the service, having been appointed Superintendent of the new Roundthorn Nursery School. Mrs. Bracewell (née Beastall) joined the staff in October, 1945. Mrs. M. T. Beech was appointed to the post and commenced duties in February.

NURSERIES AND CHILD MINDERS REGULATION ACT, 1948

Industrial Day Nurseries

On the 1st January, 13 nurseries were registered under this Act for children aged 0-5 years, and provided a total accommodation of 543 places comprised as follows:—

Age 0-1 year	46 places
Age 1-2 years	181 places
Age 2-5 years	316 places

In addition, one nursery is registered for the accommodation of not more than 35 children aged 5-10 years during the school holidays only.

Details of these nurseries have been given in previous reports.

No plans for new nurseries were submitted or approved during the year. In July proposals for adaptations to the Werneth Spinning Company Nursery to increase the accommodation for children 2-5 years and dispense with that for children 0-1 year, were agreed. The adaptations were incomplete at the end of the year.

The following table summarises the nursery provision at the 31st December :—

Name of Nursery	Age Groups			Total Places
	0-1	1-2	2-5	
* Central Mill	6	9	12	27
* Coldhurst Hall	—	—	30	30
* Derker Mill	7	14	25	46
* Hartford House	—	34	34	68
* Heathbank	6	14	30	50
* Iris Mill	12	16	19	47
Oldham Twist	—	13	19	32
Orme Mill	—	17	24	41
* Oakbank	—	15	42	57
Royd Mill	—	15	25	40
* Werneth Spg. Co. Ltd.	10	15	24	49
* Willow Bank	—	12	19	31
Borough Spinning Co. ...	5	7	13	25
Totals	46	181	316	543

Greenbank Nursery, children aged 5-10 years 35

* The Management of these firms provide transport to and from the nursery.

Close co-operation exists between this department and the industrial firms concerned and by arrangement with certain of the firms, regular visits are made to the nurseries by the medical staff of the Department for medical inspection and immunisation of the children. The firms are encouraged to consult the department if any difficulties arise. In four nurseries the management have their own practitioner attending for the medical care of the children.

Child Minders

No child minder is registered under the Act. During the year five persons applied for registration. On being informed of the requirements of the Act, two withdrew their applications. In the following three cases registration was refused :—

1. Applicant was day minding three children under the age of five years. It was considered that the premises were unsuitable.
2. Applicant, aged 71 years and suffering from deafness, was day minding three children under the age of five years. Registration was refused on account of the age of the applicant and her imperfect hearing. The premises were also considered unsuitable.
3. Applicant was day minding six children under the age of five years. It was considered that the premises were unsuitable.

There was one prosecution under the Act for failure to register as a child minder. The following are brief details of this case:—

A married woman, prior to making application for registration (Case No. 3) had advertised under a box number "Day Nursery. Splendid accommodation for toddlers. Reasonable." It was subsequently found that she was day minding six children under the age of five years. She was prosecuted and found guilty, a fine of £5 and 30s. 0d. costs being imposed. The particulars of this case had been reported to the Committee in the previous December, but the hearing did not take place until February this year.

MIDWIVES SERVICE

(Section 23)

At the beginning of the year, in addition to the Supervisor of Midwives, twelve midwives and one part-time midwife were employed. During the year, three midwives were granted leave of absence, five midwives resigned and nine midwives were appointed. The following were employed at the end of the year:—

- 1 Non-Medical Supervisor.
- 1 Senior Assistant Superintendent.
- 13 District Midwives.
- 7 Pupil Midwives.

A part-time nurse was engaged on duties in connection with hospital discharges after the tenth day and other special visits. She undertook no deliveries and accepted no bookings. One district midwife who has received special training undertakes full-time duties in connection with the nursing of premature babies.

The Oldham District Midwifery Service is approved by the Central Midwives' Board as a Part II Training School to train eight pupil midwives at any one time. During the year fifteen new pupils were accepted for training and twelve were successful in passing the Part II examination of the Central Midwives' Board.

The Maternity and Child Welfare Sub-Committee have approved the award of prizes to the best pupil midwives. An examination consisting of a written paper, viva voce, and practical, is carried out each six months and prizes are awarded on the results of this examination which is conducted by members of the staff.

Attendance after Confinement

In November, a report was submitted to the Maternity and Child Welfare Sub-Committee recommending that:—

"The midwife should attend the mother and baby for one month after confinement."

This was a recommendation contained in the Report of the Working Party on Midwives (H.M.S.O. 1949).

The Sub-Committee adopted the recommendation which will operate from the 1st January, 1952. The midwife will remain in attendance visiting two or three times weekly during the third and fourth weeks or

more often in special cases. The midwife will not trespass on the sphere of the health visitor but arrangements will be made for closer co-operation between the midwife and the health visitor who will visit after the 28th day. It will only be possible to apply this recommendation to cases booked and delivered by municipal midwives. Cases confined in hospital and discharged before the fourteenth day after delivery will only be visited up to and including the fourteenth day unless special circumstances require the continued attendance of the midwife for a longer period.

Gas and Air Analgesia

All the full-time midwives employed during the year were qualified to administer gas and air analgesia. Provision is made for training in the use of approved methods of analgesia of any domiciliary midwife entering the service who is not already so trained. There are fourteen sets of apparatus provided and the necessary transport is available through the Ambulance Service.

Transport

Transport is provided by the Ambulance Service from 5-30 p.m. to 8-30 a.m. and at week-ends. By arrangement with the Cleansing and Transport Department a car is available during the day time for urgent calls to confinements for midwives attending cases out of their own district and in emergency. This car is also available for transporting gas and air equipment. At all other times the midwives use public service vehicles.

Municipal midwives are included as "casual users" in the Scheme of Motor Car Allowances of the Corporation.

Midwives' Accommodation

At the end of the year the Council was providing the following accommodation for midwives:—

1. Private Houses—

Owned by local health authority 2

Rented by local health authority :

(i) from private owner 1

(ii) from Corporation Housing Dept. 4 5

2. Midwives' Homes 2

These provide accommodation for 11 midwives or pupil midwives.

Post-Certificate Instruction

One district midwife attended a course arranged by the Royal College of Midwives and held at Leeds from the 22nd to 28th July.

The Supervisor of Midwives attended a course arranged by the Association of Supervisors of Midwives which was held at Oxford from the 9th to 14th April.

The following lectures were arranged for midwives and other public health nurses. Midwives from adjacent areas were invited to attend these lectures which were held at the Central Clinic, 29, Queen Street;—

1951

October—"Neo-Natal Emergencies"	Dr. D. Hilson
November—"The Rhesus Factor in Neo-Natal Pædiatrics"—	Dr. D. Hilson
December—"Tuberculosis and Pregnancy"	Dr. E. Ratner

1952

January—"Tuberculosis in Children and B.C.G."	Dr. E. Ratner
February—"Heart Diseases in Pregnancy"	Dr. J. Hirst
March—"Anæmia in Pregnancy"	Dr. J. Hirst

Hospital Discharges

In January a communication was received from the Central Midwives' Board advising that if patients are to be discharged on the tenth day, prior arrangements must be made for transfer of responsibility for the rest of the lying-in period. Arrangements were made for all maternity patients discharged from Boundary Park General Hospital and the Woodfield Maternity Home to be notified to the appropriate local health authority. In the case of Oldham residents the name, address and date of discharge is notified to the Supervisor of Midwives by telephone, prior to an agreed discharge form being received.

Summary of Work Undertaken by the Municipal Midwives during the Year

Confinements :...

Number of cases booked	839
Number of confinements attended	731
Number of cases receiving analgesia	595

Visits :

Ante-Natal cases	2,700
During lying-in period	13,642
Post-Natal	293
Hospital discharges	2,831

During the year 1,870 live births and 49 stillbirths relating to Oldham residents were notified. Of these, 1,154 (60.14 per cent) occurred in institutions and 765 (39.86 per cent) were domiciliary confinements. Of the latter, 740 (96.73 per cent) were attended by municipal midwives and 25 (3.27 per cent) by midwives in private practice.

MIDWIVES ACTS, 1951

The Midwives Act, 1951, which consolidated legislation relating to midwives came into operation on the 1st September, 1951. It did not alter the responsibilities of local health authorities or the duties of local supervising authorities.

Supervision of Midwives

During the year, 63 midwives notified their intention to practise compared with 52 in 1950. Of these, 20 were municipal midwives, 2 midwives in private practice, 30 midwives in Boundary Park General Hospital, and 11 midwives in Woodfield Maternity Home.

Number of Maternity Cases in the Area of the Local Supervising Authority Attended by Midwives During the Year

	Domiciliary Cases		* Cases in Institutions		Total	
	As Midwife	As Maternity Nurse	As Midwife	As Maternity Nurse	As Midwife	As Maternity Nurse
Midwives employed by local health authority	706	25	—	—	706	25
Midwives employed by Oldham and District Hospital Management Committee	—	—	1686	457	1686	457
Midwives in private practice	25	—	—	—	25	—
Number of cases included in columns (3) or (4) & excluded from columns (1) or (2) attended by domiciliary midwives after discharge from the hospital or institution and before the 14th day	—	—	959	—	959	—
Totals	731	25	2645	457	3376	482

* These figures include non-resident cases confined in the Borough.

Medical Aid under Section 14 (1) of the Midwives Act, 1951

There were 209 medical aid forms sent in by domiciliary midwives as compared with 221 in 1950. The conditions for which medical aid was sought were as follows:—

Conditions in Mother		Conditions in Child	
Ante-Partum Hæmorrhage	3	Birth Injury	1
Albuminuria	1	Congenital Deformity	2
Abortion or threatened abortion	3	Coryza	3
B.B.A.	1	Cyanosis	3
Breech Presentation	1	Feebleness or Prematurity	11
Breast Condition	2	Hermaphrodite	1
Delayed Labour:		Inflammation of, or discharge from the eyes	62
First Stage	2	Mastitis	1
Second Stage	3	Septic Conditions	4
Fœtal Distress	6	Other Conditions	7
Hypertension	3		
Malpresentation	6		
Œdema	1		
Prolapsed Cord	1		
Post-Partum Hæmorrhage	8		
Pyrexia	12		
Retained Placenta	5		
Retention of Urine	1		
Ruptured Perineum	57		
Varicose Veins	2		
Other Conditions	6		
	<hr/>		<hr/>
	124		95
	<hr/>		<hr/>

Emergency Maternity Unit

During the year the Emergency Maternity Unit operating from the Boundary Park General Hospital was called out to two domiciliary cases attended by municipal midwives for the following emergencies:—

Retained placenta and hæmorrhage	1
Post-partum hæmorrhage	1

HEALTH VISITING SERVICE

(Section 24)

There has been no material change in the service during the year. The statistical return summarises the work undertaken by the Health Visitors.

The policy of achieving closer co-ordination of the duties of Health Visitors and School Nurses, as previously outlined, has continued and all new appointments have been as Health Visitor/School Nurse. One Health Visitor/School Nurse is employed on full-time duties in the School Health Service but is available for occasional and emergency duties in connection with Health Visiting.

One Health Visitor undertakes whole-time duties in connection with Tuberculosis. She also attends as nurse in charge at the Barker Street Dispensary and the cost of her services in this connection is reimbursed by the Oldham and District Hospital Management Committee.

Arrangements were completed for one of the Health Visitors to be appointed to the staff of the Venereal Diseases Clinic of the Oldham and District Hospital Management Committee to attend one evening clinic per week for a trial period. This arrangement provides closer co-operation between the curative and preventive services. The Management Committee remunerates this officer for her services while employed at the Clinic but home visits in connection with social and other problems are regarded as the responsibility of the Health Visiting Service.

In addition to their responsibilities in the Health Visiting Service, the Superintendent Health Visitor, the Deputy Superintendent Health Visitor and the Senior Health Visitor, have duties in connection with the Day Nursery Service. These officers also take an active part in the teaching of nursery students at the School of Commerce, under arrangements made with the Principal.

At the beginning of the year the staff consisted of:—

- 1 Superintendent Health Visitor.
- 1 Deputy Superintendent Health Visitor.
- 1 Senior Health Visitor.
- 12 Health Visitors.

During the year four new appointments were made, two being Student Health Visitors who had completed the course of training and obtained the Health Visitor's Certificate. The Senior Health Visitor and three Health Visitors resigned and Miss I. Watson, Deputy Superintendent Health Visitor/School Nurse also resigned in September to take up a similar post with the Middlesex County Council. This post was not filled but a Health Visitor was appointed temporary Senior Health Visitor and undertook the duties of this post pending an appointment being made.

At the end of the year, in addition to the Superintendent Health Visitor, eleven Health Visitors, devoting 2-11ths of their time to the School Health Service, were employed, and one Health Visitor employed on full-time duties in the School Health Service, was available for occasional and emergency duties.

One Health Visitor attended a course arranged by the Women Public Health Officers' Association which was held in Cambridge from the 14th to 25th July.

In January a report was submitted drawing attention to the difficulties being experienced in obtaining Health Visitors and that no applications were being received for Student Health Visitors. The following new conditions of appointment for Student Health Visitors were subsequently approved:—

During training, three-quarters of the present minimum salary of a qualified health visitor—£277 10s. 0d. per annum.

On qualifying, the minimum of the health visitor's scale, i.e., £370 per annum.

Period of service under contract—2½ years from commencement of training.

No uniform or uniform allowance to be provided by the local authority during training.

The local authority to pay lecture fees and travelling expenses.

Students to pay their own examination fees.

It is gratifying to report that as a result of these revised conditions three Student Health Visitors were appointed and commenced training at the Manchester College of Technology in October.

The following table summarises the work of the Health Visitors during the year:—

		No. of Visits paid by Health Visitors					
		Children		Children		Other	
		under 1 year		between			
		of age		the ages			
				of 1 and 5			
Expectant Mothers		First	Total	First	Total	First	Total
Visits	Visits	Visits	Visits	Visits	Visits	Visits	Visits
106	142	1926	9075	29	13198	3441	4845

The 4,845 visits made by Health Visitors to other cases were made up as follows:—

Premature Births	6
Stillbirths	42
Infant Deaths	73
Handicapped Children	47
Cases of Infectious Diseases:	
Whooping Cough	229
Measles	1921
Ophthalmia Neonatorum	16
Dysentery	630
Nursery Accommodation	79
Daily Minders	9
Applications for provision of domestic help	428
Aged and Infirm Persons	111
Tuberculosis	1087
Vaccination	10
Other Visits	157

The following attendances were made by Health Visitors at Infant Welfare Centres, Clinics, Nurseries and Nursery Classes:—

Infant Welfare Centres	942
Day Nurseries	445
Nursery Classes	115
Chest Clinic	176
Post-Natal Clinics	35
Immunisation Clinics	49
Vaccination Clinics	39
School of Commerce—Lectures to Nursery Students	57

The Oldham Mothers' Circle

The Oldham Mothers' Circle has been continued, meetings being held fortnightly at the Community Centre. The membership has increased to over 100 members, and all meetings were well attended. There is no charge for admission and refreshments are provided at a small charge.

During the year talks, films and demonstrations were given on a variety of subjects including Speech Therapy, Play in the Home for Young Children, Children's Diet, Local Government Service and Administration and other subjects. A visit was organised to the Festival of Britain and outings to the seaside and country were also enjoyed during the summer months.

The highlight of the year was on the first anniversary of the Circle on the 25th October, when a discussion on the activities of the Circle was included in the Woman's Hour Programme of the B.B.C.

HOME NURSING

(Section 25)

There was no change in the organisation or administration of the service during the year.

The services of a district nurse can be obtained by a general practitioner on application to the Superintendent at "Glenthorne," 57, Queen's Road (Tel.: MAIn 4899). No night service is provided, but evening visits are made to patients where necessary. There is always a member of the staff on duty for evening calls and in an emergency the services of a district nurse can be obtained at any hour of the night. Telephones are installed in the homes of all district nurses.

There has been a steady demand for the services of the district nurses and again especially in the case of old people. Many of these patients were in need of hospital care and could not be admitted to the Boundary Park General Hospital Annexe owing to lack of accommodation. There were no serious staffing difficulties and it was possible to meet the demands on the service.

The district nurses use public transport but at week-ends and in exceptional circumstances, e.g., shortage of staff or extraordinary pressure of work, transport is provided by the Ambulance Service. Male district nurses using their own auto-cycles in connection with their duties, are paid an allowance of 12s. 6d. per week.

At the beginning of the year the staff consisted of:—

- 1 Queen's Superintendent.
- 3 Queen's Nurses (two female, one male).
- 6 District Nurses (five female, one male).
- 1 District Nurse (part-time).

Two female auxiliaries undertake simple bathing and give personal attention to patients. These auxiliaries are only employed on selected cases and always under supervision. Their services are especially useful in the case of old people who are confined to bed and whose main needs are simple care and attention as contrasted with skilled nursing.

Miss C. Bonsall, Queen's Superintendent of District Nurses, died suddenly in December after a short illness. Miss A. A. Murray undertook the duties of Superintendent pending an appointment being made.

Mr. F. P. Earnshaw, a Regular Army Reservist, who was called up for service with the R.A.M.C. in September of last year and drafted to the Far East, returned to his duties as male nurse in November.

On 31st December the staff employed was as follows:—

- 1 Queen's Superintendent (vacant).
- 4 Queen's Nurses (three female, one male).
- 7 District Nurses (five female, two male).
- 1 District Nurse (part-time).

In March the Queen's Institute of District Nursing drew attention to the increased number of open cases of tuberculosis now being nursed by district nurses and the consequent desirability of periodic X-ray examinations of the chests of such nurses. The Home Nursing Sub-Committee agreed that district nurses be offered these facilities under the mass miniature radiography arrangements and made it a condition of service for all employees in the District Nursing Service that they submit to an annual X-ray examination and to any subsequent necessary examinations as directed by the Medical Officer of Health. The X-ray examinations were arranged with the co-operation of the Medical Director of the Mass Miniature Radiography Unit operating in the area.

Queen's Institute of District Nursing .....	43

The local health authority is in membership with the Queen's Institute of District Nursing and the service was inspected by an Inspector of the Institute in April.

The Inspector drew attention to the urgent need for the provision of a district room at the Nurses Home. A scheme of alterations which would provide a district room had been prepared but in view of the high cost involved it had been decided to include this accommodation in any new central premises to be provided by the Health Committee. However, in view of the urgent need, a modified scheme was prepared and in November a tender was accepted for adaptations to the Home which would provide these facilities.

This authority is also a member of the North Western Federation of the Queen's Institute of District Nursing and in July the Chairman of the Home Nursing Sub-Committee, Councillor D. C. Hanson, Mr. T. E. C. Crozier, and the Medical Officer of Health were appointed to represent the authority at meetings of the Federation.

In September, the Establishment Committee approved a recommendation of the Home Nursing Sub-Committee that one student nurse be appointed under the scheme of the Queen's Institute of District Nursing for the training of District Nurses.

Summary of Cases Nursed

There were 1,240 cases (453 males, 787 females) nursed, and 31,136 visits made by district nurses to these cases during the year. These figures compare with 1,114 cases (376 males, 738 females) nursed and 29,470 visits made by district nurses during the previous year.

In October there was a sharp rise in the number of new cases when 121 (55 males, 66 females) were accepted.

Cases Nursed and Visits Made

	Children		Others		Total No. of Cases
	0-5	5-15	Male	Female	
Cases on books at 1st Jan.	1	1	47	127	176
New cases.....	43	28	366	627	1064
Total cases nursed during the year.....	44	29	413	754	1240
Cases on books at 31st Dec.	5	—	64	179	248

The following table summarises the cases nursed and visits made by the district nurses during each month of the year:—

		Children		Others		Total No. of Cases	Visits by District Nurses
		0-5	5-15	Male	Female		
January	...	2	5	77	196	280	2408
February	...	4	3	89	207	303	2463
March	...	1	1	90	184	276	2532
April	...	6	2	85	179	272	2354
May	...	7	—	83	185	275	2570
June	...	5	3	72	172	252	2682
July	...	10	3	76	176	265	2520
August	...	10	6	76	193	285	2825
September	...	2	8	68	197	275	2577
October	...	7	6	93	220	326	2502
November	...	8	3	83	208	302	2708
December	...	6	3	93	226	328	2995

New Cases Accepted During Each Month of the Year

Age Groups		0-1		1-5		5-15		15-40		40-60		60-65		65+		Totals
Month	M	F	M	F	M	F	M	F	M	F	M	F	M	F		
Jan.	—	—	1	—	3	1	1	9	—	18	6	7	23	35	104	
Feb.	1	—	2	1	1	—	4	8	3	7	3	8	27	49	114	
Mar.	—	—	1	—	—	1	1	4	12	5	2	2	16	35	79	
April	—	1	4	1	—	2	1	1	7	13	2	5	20	22	79	
May	—	1	2	3	—	—	3	9	6	11	2	5	15	26	83	
June	—	—	1	1	1	1	1	4	5	10	4	3	11	17	59	
July	1	1	3	2	2	—	6	8	7	8	4	2	10	30	84	
Aug.	1	2	—	1	2	2	2	7	9	13	6	5	13	23	86	
Sept.	—	1	—	—	2	2	3	8	3	11	2	6	16	32	86	
Oct.	1	—	3	3	3	2	6	6	12	9	4	6	26	40	121	
Nov.	—	1	1	—	—	1	1	2	5	10	1	3	18	27	70	
Dec.	1	—	—	1	2	—	3	6	11	12	4	4	19	36	99	
Totals	5	7	18	13	16	12	32	72	80	127	40	56	214	372	1064	

VACCINATION AND IMMUNISATION

(Section 26)

Combined diphtheria and whooping cough immunisation has been continued throughout the year and the majority of children immunised in the age group 0-3 years received this dual protection. Parents are encouraged to have their children immunised before they attain the age of one year and the majority of children are now immunised prior to school entry.

In the schools the fullest co-operation is afforded by the Head Teachers and staff. Primary immunisation is effected after school entry if necessary, and reinforcement injections are offered to all children in their sixth and eleventh years.

The materials used and dosage given are as follows :—

Protection	Age Group	Material Used	Dosage
Combined Diphtheria and Whooping Cough Immunisation	0-5 yrs.	D.P.P. (Glaxo) each c.c. containing 20,000 million H pertussis	Three injections of 0.5 c.c., 0.5 c.c., and 1.0 c.c. at an interval of four weeks between injections.
Diphtheria Immunisation (a) Primary Immunisation.	0-10 yrs.	A.P.T.	Two injections of 0.2 c.c. and 0.5 c.c. with an interval of four weeks between injections.
	10 yrs. & over	T.A.F.	Three injections of 1.0 c.c. at four weekly intervals.
	(b) Re-inforcement Injections.		
	5-10 yrs.	A.P.T.	One injection of 0.5 c.c.
	10 yrs. and over	T.A.F.	One injection of 1.0 c.c.
Whooping Cough Immunisation	0-5 yrs.	A.P.V. (Glaxo) each c.c. containing 20,000 million H pertussis.	Three injections of 1.0 c.c. at four weekly intervals.

In March a letter was received from the Chairman of the Medical Research Council Committee on inoculation procedures and neurological lesions, asking for co-operation in an investigation to estimate the risk of developing poliomyelitis within an interval of a few weeks after inoculation. This Department is co-operating fully in this enquiry.

No cases of poliomyelitis occurred which were associated with diphtheria or whooping cough inoculations, but following the notification of three cases in August (two adults and one boy aged seven years), diphtheria and whooping cough immunisation and vaccination against smallpox were suspended from the 29th August to the 1st October, the total period of suspension being 32 days.

The following table summarises the number of children completing the full course of immunisation against diphtheria and those receiving reinforcement injections during the year; the majority of children immunised under three years of age received Diphtheria Pertussis Prophylactic (Glaxo).

Age in Years	Under 1 yr.	1-2 yrs.	2-3 yrs.	3-4 yrs.	4-5 yrs.	5-10 yrs.	10-15 yrs.	Total under 15 yrs.
Diphtheria Immunisation.								
(a) Primary.								
Sessional Arrangements	356	397	67	43	21	201	55	1140
Private Practitioners...	148	222	41	13	15	17	5	461
Totals ...	504	619	108	56	36	218	60	1601
(b) Reinforcement Injections.	No. of Children having received						Total number of Reinforcement Injections.	
	First Reinforcement Injection.		Second Reinforcement Injection.					
Sessional Arrangements	1939		496					
Private Practitioners...	100		9					
	2039		505					

The following figures indicate the number of children receiving Whooping Cough protection during the year; the majority of these children received Diphtheria Pertussis Prophylactic (Glaxo).

Age in Years	Under 1 yr.	1-2 yrs.	2-3 yrs.	3-4 yrs.	4-5 yrs.	5-10 yrs.	10-15 yrs.	Total under 15 yrs.
Sessional arrangements	346	383	62	30	2	—	—	823
Private Practitioners...	128	208	30	11	6	7	—	390
Totals ...	474	591	92	41	8	7	—	1213

Vaccination Against Smallpox

The weekly session continued to be held on Tuesday afternoons but this was suspended from 4th December owing to shortage of medical staff. This session was also suspended from 29th August to 1st October following the notification of three cases of poliomyelitis in the Borough.

There are no special arrangements for the vaccination of school children. During the year 39 children of school age were vaccinated or re-vaccinated. These were mainly children who were proceeding overseas.

No special arrangements exist for the vaccination of adults. The majority of vaccinations undertaken by private practitioners relate to persons proceeding overseas.

The following table indicates the number of vaccinations and re-vaccinations undertaken:—

- (i) By Sessional Arrangements.
- (ii) By Private Practitioners (in accordance with returns received).
- (iii) By Assistant Medical Officers.

	Under 1 yr.	1-4 yrs.	5-14 yrs.	15+ yrs.	Totals
Primary Vaccinations.					
Sessional Arrangements ...	270	43	9	18	340
Private Practitioners ...	196	51	24	104	375
Assistant Medical Officers ...	—	—	—	8*	8*
Totals	466	94	33	130	723
Re-Vaccinations.					
Sessional Arrangements ...	—	—	—	17	17
Private Practitioners ...	—	2	6	236	244
Assistant Medical Officers ...	—	—	—	71*	71*
Totals	—	2	6	324	332

*These figures relate to members of the staff who were vaccinated or re-vaccinated by reason of their duties and possible contact with cases of smallpox.

AMBULANCE SERVICE

(Section 27)

The demands on the Ambulance Service have continued to increase, the total cases removed being 42,705 compared with 39,084 for the previous year. In October a new high level was reached, 4,011 cases being conveyed in the month. The mileage run, 242,543, which includes a mileage of 34,620 in connection with other services, shows an increase of 23,954. The area served includes the Saddleworth district of the West Riding and the adjacent districts of Health Division 14 of the Lancashire County Council.

The following figures indicate the number of cases removed:—

	Ambulance	Car	Total
Oldham County Borough	19,057	6,192	25,249
Lancashire County Council	10,340	3,869	14,209
West Riding County Council ...	2,205	1,039	3,244
Other Authorities	1	2	3
	<u>31,603</u>	<u>11,102</u>	<u>42,705</u>

In addition to the above, fifteen cases were removed by train. In eight cases the return fare of an escort was provided.

In accordance with the National Health Service Amendment Act a number of removals were effected by other authorities for the County Borough but in only one case was a charge made for this work.

The majority of journeys outside the Borough and the adjacent districts are to hospitals in the Manchester area. Journeys beyond these limits are not numerous and long distance journeys (over 100 miles) are comparatively rare, and whenever possible the patient is conveyed by rail. There were 127 single journeys over 25 miles but under 50 miles; 35 single journeys over 50 miles but under 100 miles; and 11 single long distance journeys over 100 miles.

There was one major accident. On the 1st May two buses collided at the junction of Middleton Road and Broadway, Chadderton, one bus overturning. This accident necessitated the conveyance of 56 casualties to hospital. The majority of the cases were walking casualties and every assistance was received from the public. At 18.11 hours a 999 call was received from a member of the public stating there had been an accident involving two buses and at 18.12 hours two ambulances were despatched. At 18.13 hours a second call was received from another member of the public saying that one of the buses had overturned and three more ambulances and a large sitting case vehicle were despatched at 18.14 hours. The first vehicle to arrive at the Oldham Royal Infirmary returned immediately to the scene of the accident and all the casualties had been removed and delivered to the casualty department at 18.35 hours. Following treatment patients were returned to their homes in Shaw, Rochdale, Didsbury, Bacup and Oldham. The Driver/Attendants assisted with the handling of the patients at the Oldham Royal Infirmary and had their services not been available there would have been considerable delays and difficulties. This assistance was much appreciated by the hospital staff and the Secretary of the Oldham and District Hospital Management Committee, Mr. F. W. Barnett, expressed his appreciation. The Ambulance Sub-Committee placed on record their appreciation of the services rendered by the ambulance staff on the occasion of this accident.

On the 1st January the fleet consisted of sixteen ambulances and five sitting case vehicles. One of these ambulances, BU 7638 was on loan to the Oldham and District Hospital Management Committee. In May a new Bedford/Lomas Ambulance with a Lomas "F" type body was taken into service. The ambulance fleet is gradually being standardised with this type of vehicle which is proving very satisfactory. In September delivery was taken of a new sitting case vehicle, an Austin Hire Car. This vehicle is admirably suited for the conveyance of sitting cases having a wide floor space and wide door entrances. Another vehicle of this type is on order and delivery is expected early in 1952. During the year one ambulance (BU 9000) was removed from service.

On the 31st December the fleet, including BU 7638 which was still on loan to the Oldham and District Hospital Management Committee, consisted of sixteen ambulances and six sitting case vehicles.

Experience has now shown that the number of ambulances required to maintain an efficient service for the area at present served is twelve. The number of sitting case vehicles allowed under the proposals, namely six, will have to be increased. This is not possible until the formality of altering the proposals in their present form has been effected.

Driver/Attendants are entered each year for the National Safe Driving Competition of the Royal Society for the Prevention of Accidents. At the end of the year 23 out of 27 Driver/Attendants eligible had qualified for the Diploma issued by the Society.

At the beginning of the year the alterations and adaptations at the West Street Depot were not completed. This work was completed early in the year but the formal opening was not until the 7th June when Councillor G. Halbert, Chairman of the Ambulance Sub-Committee, performed the opening ceremony.

In April Mr. W. E. Cooke tendered his resignation, having been appointed Deputy Ambulance Officer to Middlesex County Council, and Mr. E. G. Crapper, who was employed in the Manchester Ambulance Service, was appointed to succeed him.

In July, Ministry of Health Circular 30/51 was issued. The increasing demands on the ambulance service, especially the transport of sitting cases, had caused concern and the Circular was issued to limit the demands without denying the help of the service to anyone to whom it was genuinely necessary. Various recommendations designed to ensure economical use of the ambulance service were brought to the notice of Regional Hospital Boards, Hospital Management Committees, Boards of Governors and Local Health Authorities. The scope of the local health authority service was also clarified and certain recommendations made.

There has been little abuse or extravagant use of the Ambulance Service in this area though there is possibly some scope for certain inter-hospital transport being undertaken by the Oldham and District Hospital Management Committee. A certain amount is already undertaken with the vehicles which have been given or loaned to the hospital authorities.

The Circular also drew attention to the value of radio control in the administration of the Ambulance Service. The Ambulance Sub-Committee gave careful consideration to this provision but decided to adjourn further consideration to the next financial year as the capital cost involved in installation was considerable.

The Circular stressed the importance of further training of ambulance personnel for them to be fully efficient and a syllabus of such training was included. Supplementary training of first-aid personnel has been a feature of the service and this has been continued. Almost all the subjects included in the syllabus are already included in the training of ambulance personnel in Civil Defence.

Arrangements with Adjacent Health Authorities

West Riding County Council

By agreement with the West Riding County Council the Oldham Ambulance Service accepts and removes all accident, emergency and infectious cases arising in the Saddleworth area, with the exception of the occasional case which occurs in the area remote from Oldham and proximate to Huddersfield, which is usually removed by one of the County Ambulances based at Huddersfield. Payment for work done is based on a rate per mile which is determined at the end of each financial year.

Lancashire County Council

There has been no change in the agency arrangements with the Lancashire County Council and the County Borough continues to provide ambulance cover for Chadderton, Crompton, Royton, Lees, Failsworth and Limehurst. Payment for work done is based on a rate per mile which is determined at the end of each financial year.

Transport for Other Services

In addition to undertaking the statutory duties required under the Act the Ambulance Service has provided transport for the following services administered by the Health Committee:—

(1). Midwives Service

For normal routine duties midwives use public transport but for urgent cases during the day and when the gas and air apparatus is required a car is requested from the Cleansing and Transport Department. At all other times and over the week-end the Ambulance Service is responsible for providing transport for the midwives, a sitting case car being used. This arrangement is economical and most efficient and during the year involved a total mileage of 15,592 miles compared with 14,353 miles for the previous year.

(2). Home Nursing Service

The district nurses use public transport, but at week-ends and in exceptional circumstances, e.g., shortage of staff or extraordinary pressure of work, transport is provided by the Ambulance Service. A total mileage of 3,016 miles was involved compared with 8,619 miles for the previous year.

(3). Occupation Centre

During the year regular transport has been provided through the Ambulance Service, the children being conveyed to and from their homes.

	Oldham County Borough	Lancashire County Council	Total
No. of journeys	819	384	1,203
No. of children carried ...	6,834	1,828	8,662
Total mileage	13,012	2,860	15,872

The service also provides emergency transport for the duly authorised officers and for the emergency maternity unit which operates from Boundary Park General Hospital.

The following statistics relate to the work of the Ambulance Service during the year:—

	Ambulances	Cars	Total
1. Number of vehicles at 31st December	16	6	22
2. Number of journeys	12,342	7,167	19,509
3. Number of patients carried	31,603	11,102	42,705
4. Number of accident and other emergency journeys (included in (2) above)	5,090	111	5,201
5. Total mileage	128,585	113,958	242,543

(The above figures include removals for the Lancashire and West Riding County Councils and also the mileage run in connection with other services.)

Civil Defence

The Civil Defence Act, 1948, and subsequent circulars define the duties and responsibilities of Local Health Authorities in Civil Defence. The peace-time ambulance service will be the nucleus of the war-time ambulance service and the personnel are required to be trained in civil defence duties.

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

(Section 28)

Tuberculosis

Details of notified cases and other statistics relating to tuberculosis are given in the Infectious Diseases Section of the report.

The previous staffing arrangements have been continued. Dr. H. S. Bagshaw, Chest Physician, undertakes duties in connection with prevention and after-care, and the Tuberculosis Health Visitor assists at the Chest Clinic sessions. Under these arrangements there is some degree of co-operation between the preventive and curative services.

The supply of milk to patients attending the Chest Clinic has been continued and suitable cases in need of extra nourishment are referred to the Public Health Department so that orders can be issued. During the year 38 individual patients were issued with 225 orders for the supply of free milk. Each order permits the supply of milk for a period of one month and 148 orders were for two pints per day and 77 orders for one pint per day.

Good housing conditions play a large part in the prevention and cure of tuberculosis but the acute housing shortage persists and it is still not possible to recommend for re-housing every family where the housing conditions are unsatisfactory. On the recommendation of the Medical Officer of Health the Housing Sub-Committee gives priority to cases of pulmonary tuberculosis with a positive sputum and under the points scheme other cases of tuberculosis receive up to a maximum of five points by reason of this condition. During the year priority recommendations were made in respect of twelve cases, and eleven cases received additional points. The Housing Sub-Committee, in the course of the year, re-housed eight families under the "priority arrangements."

Co-operation with Voluntary Associations

No specific duties have been delegated to voluntary organisations.

The Home Nursing Sub-Committee made a grant of £5 5s. 0d. for the financial year 1951-52 to the National Association for the Prevention of Tuberculosis in support of the general work which the Association undertakes in the fight against tuberculosis.

During the year two patients were admitted to the Rehabilitation Unit of the British Legion Village (Preston Hall), Maidstone. The first, a male aged 21 years, was admitted in January, but unfortunately his condition deteriorated and in May he required sanatorium treatment. The second, a male aged 28 years, was admitted in August, and was still there at the end of the year. A male patient aged 41 years, who was admitted to the East Lancashire Tuberculosis Colony, Barrowmore Hall, in April, 1950, remained there throughout the year. This authority has accepted financial responsibility for the maintenance of these cases.

Mass Miniature Radiography

The Manchester Regional Hospital Board have a mobile unit based at Rochdale which serves the County Boroughs of Bury, Oldham and Rochdale, and also adjacent county districts. The unit did not visit Oldham during the year but arrangements were completed for it to commence early in January, 1952.

In accordance with Ministry of Health Circular 64/50 and Home Office Circular 228/50, staff requiring an X-ray examination prior to engagement, and at annual intervals, are now referred to the Medical Director of the Unit for examination. In July, when the Unit was stationed in Failsworth, 257 members of the Public Health and Children's Departments attended for examination. Arising from this survey three persons were referred for further investigation and examination.

B.C.G. Vaccination

The vaccination of selected contacts of known cases has been continued. These arrangements are under the control and supervision of Dr. H. S. Bagshaw, Chest Physician. During the year, 80 children (37 boys and 43 girls) who were found to be Mantoux negative received B.C.G. Vaccination. Subsequent Mantoux tests were positive in each case.

Medical Research Council—Anti-Tuberculosis Investigation

The Medical Research Council is undertaking controlled clinical trials of anti-tuberculosis vaccines, and in July requested the co-operation of this authority in their investigation. The Education and Health Committees readily agreed to co-operate and the scheme is fully described in the report of the School Medical Officer (1951).

The volunteers who are taking part in the trial are children who will leave secondary modern schools at the age of fifteen years and will have entered the 15-25 age group which is known to produce a very large number of cases of tuberculosis.

The children are X-rayed and tuberculin tested, and by this test it is possible to find out children who have already had their first infection with the germ of tuberculosis. Rather less than half of the children who are tested are found to have had a tuberculosis infection and have presumably built up some resistance to the disease. Most of the children who are found not to have had their first infection are given either B.C.G. or Vole vaccine.

Dr. G. G. Lindsay, the Physician-in-Charge, in his first report on the scheme, writes:—

“Every child who completes one series of tests will be very carefully watched over the next three years. He or she will receive a questionnaire form about four months after leaving school, and a visit from one of the Health Visitors a few months later, and any change in the child's health will be noted. After about twelve months the Mass Radiography Unit of the Medical Research Council will be in Oldham and all the young people in the scheme will be asked to attend for a chest X-ray, which will be of the greatest value, both to the Medical Research Council and also to the young people themselves. These routine procedures will take place during

each of the next three years, and at the end of that time it will be possible to assess the amount of protection which the vaccines have conferred, and it may also be possible to establish which of the two vaccines is the more effective.

The response to the trial in Oldham has been really magnificent and the volunteer rate has been the highest of all the towns taking part in the North."

In November, the first batch of school leavers was examined; and the following figures relate to these children:—

	Christmas Leavers, 1951	Easter Leavers, 1952
Number of School Leavers	319	256
Number of acceptances	254	212
Number completing examination	240	197
Percentage admitted to trial	75.2	77.0
Total number positive	113	95
Total number negative	127	102
Total number vaccinated	84	72
Total number in control group	43	30

Mental Illness or Defectiveness

The arrangements for the care and after-care of persons suffering from mental illness or defectiveness are fully described in the Mental Health Section of this report.

Other Types of Illness

There has been co-operation between the Hospital Staffs and the officers of the Department, and requests were received for information with regard to patients. Assistance has been given through the Home Nursing and Domestic Help Services to patients discharged from hospital.

Provision of Nursing Requisites and Apparatus

(a) By the Local Health Authority

(i) Tuberculous Cases

Nursing requisites are available through the Chest Clinic. During the year 25 patients received nursing requisites, and at the end of the year thirty patients were receiving this assistance. The following table shows the items issued during the year, and the equipment on loan at the 31st December:—

Item	No. issued during the year	No. on loan at 31st Dec.
Beds	15	23
Mattresses	16	23
Mattress covers	—	17
Blankets	34	58
Pillows	16	19
Bed Rests	1	3
Urinals	2	1
Bed Pans	5	2
Air-rings	1	1

(ii) **Maternity Cases**

The arrangements with the Midwives' Service for the loan of nursing requisites required for the mother and her baby have been continued. Beds, mattresses, blankets, pillows, cot sheets, cot blankets, bed pans, air-rings, hot water bottles, and nightdresses are available.

(b) **By Voluntary Organisations**

St. John Ambulance Brigade (Oldham Corps),
Medical Comforts Depot, Park Road, Oldham.

General medical and surgical cases in need of nursing requisites can obtain these through the Medical Comforts Depot. The Depot continues to provide a most useful service and nursing requisites are obtained on the certificate of a medical practitioner. The Brigade have agreed to make available such items of equipment as the Medical Officer of Health may consider necessary. A deposit is charged when an article is loaned but this is refunded on its return. The Depot is open on week-days from 7-30 p.m. to 9-0 p.m. During the year 553 patients received assistance and 804 articles were loaned. The following table shows the items issued during the year, and the equipment on loan at the 31st December:—

Item	No. issued during the year	No. on loan at 31st Dec.
Air-beds	1	1
Air-rings	163	40
Bed cradles	14	5
Bed pans	158	56
Bed rests	111	31
Bed tables	6	4
Commodes	1	3
Crutches (pairs)	4	3
Feeding cups	24	4
Hot water bottles	6	1
Invalid chairs	29	14
Kidney bowls	1	—
Lotion bowls	—	1
Rubber sheets	180	40
Sorbo beds	4	1
Sputum mugs	3	2
Urinals	97	29
Walking sticks	2	2

For the financial year 1951-52 the Health Committee reimbursed the Brigade in respect of all establishment charges incurred at the Medical Comforts Depot and made a grant of £40 for the replacement of nursing requisites.

Convalescence

As part of their after-care arrangements Local Health Authorities have power under Section 28 to provide convalescence where no active treatment is required. Regional Hospital Boards can also provide convalescent care for patients who still require medical treatment and

nursing. Where convalescent treatment is in the nature of a rest after illness, or a change of air, and there is no active treatment required, it will not be provided by the Boards. All would benefit by a rest and change of air, and most adults could make a claim for convalescence of this type. The acceptance of convalescence provision in this wide sense would be impracticable and cause serious financial implications. No complete scheme for convalescence has been approved by the Health Committee, but it has been agreed that in special circumstances cases may be recommended to the Committee for consideration.

During the year five pre-school children and three adults were provided with a period of convalescence under these arrangements at a cost of £259. The full cost was met by the Committee, but in each case it was possible to recover part of the cost.

In addition to the arrangements outlined above, a scheme for the provision of convalescence for school children is provided by the Local Education Authority, suitable cases being recommended through the School Health Service. During the year 17 children (9 boys and 8 girls) were sent for a period of convalescence under this scheme.

DOMESTIC HELP SERVICE

(Section 29)

There was no change in the organisation or administration of the service during the year. The Domestic Help Organiser is responsible to the Medical Officer of Health for the general supervision of the service.

The following figures show the staff employed at the beginning and at the end of the year:—

	1st January	31st December
Whole-time (30 hours or more per week)	13	14
Part-time (under 30 hours per week) ...	41	36

The demands on the service continued to increase and 780 cases received assistance compared with 565 in the previous year. The main provision was again for aged persons, the majority of whom were living alone and in some cases awaiting admission to hospital.

The full charge made to householders was increased from 2s. 1d. per hour to 2s. 3d. per hour with effect from the 15th January. This was necessitated by a wage award of the North Western Whitley Council to domestic helps which had been announced in the previous November. Following a further wage award and a review of the cost of the service for the financial year 1950-51, the Committee again increased the charge from 2s. 3d. to 2s. 9d. per hour with effect from the 12th November. In cases where the full charge cannot be met it may be reduced or waived according to circumstances. At the beginning of the year the A.M.C. scale of allowances was in use and a special section of the Home Nursing Sub-Committee considered any appeals against assessment.

In May the scale of assessment was reviewed and modifications were made to the A.M.C. scale so that the allowances were more comparable with those of the National Assistance Board. In all cases where the assessment is less than 1s. 6d. per week, no charge is made. Domestic help is provided free of charge to blind and tuberculous persons. Persons

entitled to National Assistance, having the services of a domestic help, are assessed in the normal manner and an arrangement has been agreed with the Board whereby the amount assessed is recovered from the user.

By arrangement with the Education Department a course of twelve lectures in Home Craft for domestic helps was held in the Women's Institute, Chaucer Street, from the 8th January to the 9th April. These lectures were held in the evening and were well attended.

The following table shows the number and type of cases that received assistance :—

Type of Case	Cases on books at 1st January	New Cases	Total Cases receiving Assistance	Cases (remaining) on books at 31st December
Sickness	47	177	224	34
Aged persons (including with sickness) (females 60+ ; males 65+)	230	225	455	216
Tuberculosis	4	7	11	3
Maternity Cases	2	88	90	1
Totals	283	497	780	254

Night Attendants

The arrangements for the provision of a night attendant in cases where a patient is acutely ill or living alone, or where the relatives need some temporary night help, have been continued. This service has met a real need especially in the case of patients who could not get immediate hospital admission.

The cost of this service was increased from 10s. 0d. per session to 12s. 6d. per session from the 14th June. This cost is recoverable from the patient, but as the majority of cases receiving this assistance are Old Age Pensioners, in only a few cases can the full charge be made.

There were seven night attendants who undertook regular duties throughout the year when required and additional assistance was obtained when there was a heavy demand on the service.

Number of cases	47
Number of "night sessions"	267

MENTAL HEALTH SERVICE

(Section 51)

All matters relating to Mental Health and Mental Deficiency are referred to the Mental Health Sub-Committee of the Health Committee. The Sub-Committee consists of seven members of the Health Committee and four co-opted members.

The Council have appointed the Mental Health Sub-Committee a special Committee under Section 85 of the Local Government Act, 1933, and delegated to the Sub-Committee all the powers of the local health authority under paragraphs (a) and (b) of Section 30 of the Mental Deficiency Act,

1913 (as amended by subsequent Acts). All other proceedings of the Sub-Committee are subject to confirmation by the Health Committee and the Council.

The Medical Officer of Health is responsible for the administration of the service and is assisted by the Medical Officers of the Department.

Staff

Medical Staff

Dr. A. P. Buchan, Senior Assistant Medical Officer, continued to undertake special clinical duties in the Department until he left in December to take up an appointment at Whittingham Hospital. This officer, together with Dr. J. Starkie, Senior Assistant Medical Officer, and Dr. A. P. Curran, Assistant Medical Officer, are approved by the Authority for the purposes of the Mental Deficiency Acts, 1913-1938. These officers are also approved by the Minister of Health for the purpose of making recommendations under Sections 1 (3) and 5 (3) of the Mental Treatment Act, 1930.

In December, Dr. W. P. B. Stonehouse, Assistant Medical Officer, was also approved by the Authority and by the Minister of Health for these purposes.

The services of Dr. G. S. Robertson, Medical Superintendent, Calderstones Hospital, and Consultant in Mental Deficiency, Oldham Hospital Group, are available to the Local Health Authority, and his opinion is always obtained in cases which present any difficulty or doubt.

Dr. Arthur Pool, Consultant Psychiatrist to the Oldham Hospital Group, is also Consultant Psychiatrist to the Local Health Authority.

Duly Authorised Officers

The establishment provides for the appointment of three Duly Authorised Officers, who are also Mental Health Visitors. These three posts were filled throughout the year.

Social Workers

As stated above, the establishment provides for the appointment of three Mental Health Visitors, who also act as Duly Authorised Officers.

The establishment also provides for the appointment of two Psychiatric Social Workers. It has not been possible to fill these posts, and in September, this establishment was varied to allow the appointment of two Mental Health Visitors, or two Psychiatric Social Workers, the Mental Health Sub-Committee accepting the recommendation of the Committee on Social Workers in the Mental Health Service, that the term Psychiatric Social Worker be restricted to persons holding a University Mental Health Certificate.

Miss B. Butterworth and Mr. J. B. Dearnaley, B.A. (Hons.), were appointed to fill these posts. In February, Miss Butterworth had been seconded temporarily to undertake the duties of Social Worker in the Mental Health Service.

As it was found possible during the year to obtain the services of qualified Mental Health Visitors, the post of Student Mental Health Visitor was not filled.

Occupation Centre

The staff establishment allows for the appointment of one Supervisor and four Assistants. These posts were filled throughout the year.

Training of Mental Health Workers

In February, Dr. J. Starkie and Dr. A. P. Buchan attended a special two-day residential course for Deputy and Assistant Medical Officers, which was arranged at Calderstones Hospital.

In April, the Supervisor and one Assistant attended an eight-day residential refresher course for Staffs of Occupation Centres organised by the National Association for Mental Health and held at Hulme Hall, Manchester.

In April, Mr. A. White, Senior Mental Health Visitor, attended a two-day residential school at Hulme Hall, Manchester, organised by the Community Council of Lancashire.

The only course of training which provides a qualification for staff employed in Occupation Centres is organised by the National Association for Mental Health and is held in London, covering three academic terms. As there is an urgent need for qualified staff in the North West Region, the Association were requested to consider setting up such a course in Manchester, provided a sufficient number of students would enrol. This proposal was reported to the Mental Health Sub-Committee with a recommendation that the Supervisor, Mrs. J. L. Worfolk, should attend such a course. The Sub-Committee accepted this recommendation, but arrangements for the course to be held were not completed at the end of the year.

Co-ordination with Regional Hospital Boards and Hospital Management Committees

The staff of the Mental Health Service have received the fullest co-operation from the Consultant Psychiatrists of the Oldham Hospital Group, and also from the Group Secretary, Mr. F. W. Barnett, who acts as Clerk.

Dr. G. S. Robertson, the Consultant in Mental Deficiency, visits Oldham at regular intervals and his opinion is requested in cases where problems of diagnosis or disposal arise. His services are especially appreciated in the case of adults who have not been ascertained or notified as defectives before leaving school.

The Health Committee have appointed Dr. Arthur Pool the Consultant Psychiatrist to the Local Health Authority. This appointment has proved most successful and has provided the co-ordination between the hospital and preventive services which is so essential to provide the best service for the patient. Dr. Pool holds a weekly discussion group with the medical officers and all the mental health social workers, when new cases are discussed and the problems and progress of other patients reported.

Early in the year, arrangements were agreed between the Committees concerned for the Mental Health Visitors to undertake duties at Boundary Park General Hospital Annexe and Oldham Royal Infirmary, which were primarily the responsibility of the hospital service. It is in the best interests of the patient that the social workers undertaking the domiciliary

care of the patient should continue to have contact with the patient while in hospital, and be available to help in any social problem that may arise. The arrangement has worked well. One Mental Health Visitor attends Dr. Pool's Out-Patient Clinic, and others visit the Mental Wards and assist with group and recreational therapy. The Management Committee reimburse the Health Committee the full cost of these services.

The Mental Health Visitors have continued to supervise mental defectives on licence. They prepare all reports required in connection with these cases and any reports for cases whose orders for detention are subject to review under Section 11 of the Mental Deficiency Act.

The Mental Health Visitors also prepare a detailed social history for each patient suffering from mental illness and admitted to a Mental Hospital and this is forwarded to the hospital concerned shortly after the patient's admission. They prepare any further reports that may be required on home conditions prior to the patient's discharge if requested.

The Constitution of the Mental Health Sub-Committee allows for the member of the Oldham and District Hospital Management Committee, co-opted on the Health Committee to be a member. Alderman Frank Lord, O.B.E., J.P., Chairman of the Hospital Management Committee, is the member for the year 1951-52.

Co-operation with Voluntary Associations

No specific duties have been delegated to voluntary organisations.

The Oldham Council for Mental Health, whose main function is now educational, organised the under-mentioned lectures during the year, and the Annual Meeting in May was followed by a Brains Trust. No grant was made to the Council during the financial year 1951-52.

January	"Some Problems in the Treatment of Criminals."	George Benson, Esq., M.P., Chairman of the Howard League for Penal Reform.
May	"Juvenile Delinquency and the Psychiatrist."	Dr. G. R. Pile, Psychiatric Adviser, Regional Hospital Board.
May	Annual Meeting—"Brains Trust." (Question Master, Mr. R. E. Edwards, B.Sc., M.Ed.)	Dr. E. M. Duthie, Miss B. E. Martland, J.P., Rev. G. R. Lloyd, Dr. Arthur Pool.

Two members of the Council are co-opted on to the Mental Health Sub-Committee, and in May, the Health Committee re-appointed the Rev. G. R. Lloyd and Miss I. M. Brislee as members for the current municipal year.

Prevention of Illness, Care and After-Care

General Practitioners and relatives are bringing an increasing number of cases to the notice of the Mental Health Visitors before admission to hospital is arranged, or is necessary. After a full history has been obtained the most appropriate action is taken. This early reference results in patients receiving early treatment as out-patients, or agreeing to admission as voluntary patients.

Following the admission of a patient to the Boundary Park General Hospital Annexe or other mental hospital, arrangements are made for relatives to be referred to the Mental Health Visitors for information and advice.

In accordance with the Mental Treatment Rules, 1948, details of all admissions, transfers or discharges from Boundary Park General Hospital Annexe are forwarded to the Medical Officer of Health. Similar information is received from other Mental Hospitals in respect of Oldham residents.

Many patients on discharge from hospital are recommended for supervision and any necessary after-care. The Mental Health Visitors visit these cases, and their progress or any problems that may arise are reported to the Consultant Psychiatrist at his weekly meeting.

The following is a summary of the visits and reports made by the Mental Health Visitors:—

Pre-Care Reports	199
Social Histories	138
Pre-Discharge Reports	22
After-Care Reports	356

Convalescence from Mental Illness

There are no facilities in the North West for patients suffering from mental illness who would benefit from simple convalescent home treatment. Such facilities would provide for pre-care cases and greatly assist the hospital patient who is not quite ready for discharge home. There are a number of suitable homes in the South of England for this purpose and such provision in the North West would meet a real need.

The Medical Officers of Health in this region have given careful consideration to this problem, and during the year discussions have taken place with representatives of the Manchester and Liverpool Regional Hospital Boards, and the Mental After-Care Association. This Association is willing to acquire and maintain a home in the North West and would admit cases where the full maintenance charge was guaranteed by Local Health Authorities or other bodies.

The Mental Health Sub-Committee has agreed to make use of these facilities should they become available in the future.

LUNACY AND MENTAL TREATMENT ACTS, 1890-1930

Work Undertaken by the Duly Authorised Officers

Duly Authorised Officers undertake duties under the Lunacy and Mental Treatment Acts which were previously performed by Relieving Officers. Their main duty is to take the initial proceedings for the removal of a patient requiring hospital care.

The services of the Duly Authorised Officer are available throughout the 24 hours, one officer being on rota duty for evening and week-end calls. The officer on duty can be contacted through the Police or the Central Admissions Bureau at Boundary Park General Hospital Annexe.

The following is a summary of the visits made and work undertaken by the Duly Authorised Officers:—

(A) **Visits :**

- | | |
|--|-----|
| 1. At the request of general practitioners | 128 |
| 2. Other sources (police, relatives, neighbours, etc.) ... | 17 |

145

(B) **Admissions and Removals to Hospital :**

(a) **Lunacy Act, 1890, Section 16** (Summary Reception Orders)

Birch Hill Hospital, Rochdale	1
Boundary Park General Hospital Annexe, Oldham ...	15
Lancaster Moor Hospital, Lancaster	3
Prestwich Hospital, Manchester	2*
Rossendale Hospital, Lancashire	1
Springfield Hospital, Manchester	2
Whittingham Hospital, Preston	2‡

26

(b) **Lunacy Act, 1890, Section 20** (3-day orders)

Boundary Park General Hospital Annexe, Oldham ...	21
Prestwich Hospital, Manchester	1
Springfield Hospital, Manchester	1

23

(c) **Lunacy Act, 1890, Section 21** (14-day orders)

Birch Hill Hospital, Rochdale	3
Boundary Park General Hospital Annexe, Oldham ...	19
Bridgewater Hospital, Eccles	1
Prestwich Hospital, Manchester	5
Springfield Hospital, Manchester	1
Wesham Park Hospital, Kirkham	1

30

(d) **Mental Treatment Act, 1930, Section 5**

(Temporary Patients)

Boundary Park General Hospital Annexe, Oldham ...	1
Rainhill Hospital, Liverpool	1

2

(C) **Completion of Orders for Further Detention :**

(a) **Lunacy Act, 1890, Section 16** (Summary Reception Orders)

Boundary Park General Hospital Annexe, Oldham ...	25
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25

(b) **Mental Treatment Act, 1930, Section 5**

(Temporary Patients)

Boundary Park General Hospital Annexe, Oldham ...	2
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2

* Includes one patient transferred from Boundary Park General Hospital Annexe, admitted on a three-day order.

‡ Includes one patient transferred from Boundary Park General Hospital Annexe, admitted on a three-day order.

Facilities for Treatment

A Psychotherapeutic Clinic is held at the Oldham Royal Infirmary on Wednesday and Thursday afternoons. Patients are referred direct by their own practitioner, or by the Mental Health Visitor with the consent of the practitioner, or on the advice of the Consultant Psychiatrist.

The majority of patients requiring hospital treatment are admitted to the Boundary Park General Hospital Annexe which is a designated mental hospital. Since the appointment of a Consultant Psychiatrist, modern methods of therapy have been introduced and only occasionally are patients transferred to the other mental hospitals in the region.

There has been a marked increase in the number of voluntary patients admitted during the year. The Mental Health Visitors give every assistance to these patients and to the medical staff of the hospital concerned. They frequently accompany the patient to hospital.

In many areas, difficulties have been experienced in securing the admission of mental cases, particularly aged persons to mental hospitals. No real difficulties have been experienced in Oldham, and in all cases of acute urgency, admission was readily effected.

The following summarises the admissions of Oldham residents notified to the Department during the year:—

Hospital	Admissions			Total
	Under Order	Voluntary Patients	Temporary Patients	
Birch Hill Hospital	4	—	—	4
Boundary Park General Hospital Annexe	55	83	1	139
Bridgewater Hospital	1	—	—	1
Lancaster Moor Hospital	3	—	—	3
Prestwich Hospital	8	22	—	30*
Rainhill Hospital	—	—	1	1
Rossendale Hospital	1	—	—	1
Springfield Hospital	4	1	—	5
Wesham Park Hospital	1	—	—	1
Whittingham Hospital	2	1	—	3‡
Totals	79	107	2	188

* Includes one patient transferred under Section 16 from Boundary Park General Hospital Annexe.

‡ Includes one patient transferred under Section 16 from Boundary Park General Hospital Annexe.

Notification was received of 43 Oldham residents who died in Mental Hospitals and of 162 discharges.

Information was received of 29 patients detained in hospital who were transferred to voluntary status (23 Boundary Park General Hospital Annexe, 4 Prestwich, 2 Rainhill).

Information was also received of eight patients who were transferred under Section 64 of the Lunacy Act, 1890, by two members of the Hospital

Management Committee authorising the removal of the patient. The following are details of these cases:—

Boundary Park General Hospital Annexe to Prestwich Hospital ...	3
Lancaster Moor Hospital to Whittingham Hospital	1
Prestwich Hospital to Boundary Park General Hospital Annexe ...	1
Prestwich Hospital to Springfield Hospital	1
Rainhill Hospital to Whiston Hospital	1
Springfield Hospital to Whittingham Hospital	1

Ambulance Service

The Ambulance Service is utilised for the removal of patients to mental hospitals and mental deficiency institutions. The Duly Authorised Officers have authority to request an ambulance or sitting-case car and, where necessary, the services of attendants are obtained from the Boundary Park General Hospital Annexe.

In July, Ministry of Health Circular 31/51 was issued. This circular gave the latest advice to local health authorities on the queries that had been raised regarding the conveyance of persons suffering from mental illness and mental defectiveness since the inception of the National Health Service. No difficulties have arisen locally and there is the closest co-operation with the staffs of the various hospitals.

MENTAL DEFICIENCY

Cases Reported During the Year

There were 67 cases reported during the year.

Of these, 22 were reported under the Education Act, 1944, 4 having been found incapable of receiving education at school, and 18 requiring supervision after leaving school.

There were 45 cases reported under the Mental Deficiency Acts as follows:—

- (a) Detained in the Mental Wards of Boundary Park General Hospital Annexe 40
- (b) At the instance of the parent or guardian (Male aged 36 years; female aged 12 years) 2
- (c) Referred by the police or by the Courts under Section 8 (1) (a) or as a result of other action by the Courts (Male aged 16 years; two females aged 16 years) 3

With regard to the 40 cases detained in the mental wards of the Boundary Park General Hospital Annexe, certificates of exception were applied for and received in respect of all these cases.

Further particulars relating to the cases reported during the year are given in the tables relating to mental deficiency.

Ascertained Defectives Found to be "Subject to be Dealt With"

During the year there were 81 defectives found to be "subject to be dealt with," 14 of these cases being reported in the previous year. Of these, 21 were placed under statutory supervision. There were 57

defectives recommended for institutional care, and 52 of these were detained in the Mental Wards of the Boundary Park General Hospital Annexe.

The remaining three cases were admitted to Mental Deficiency Hospitals as a result of action through the courts, and one was transferred by an Order of the Secretary of State from a remand home.

Statutory Supervision

At the end of 1950, 174 cases were shown as under statutory supervision, but eleven of these cases were at that time awaiting institutional care. There were, therefore, 163 cases purely under statutory supervision at the beginning of the year.

During the year 21 cases were placed under statutory supervision.

The following details relate to the ascertained cases found to be "subject to be dealt with" and placed under statutory supervision:—

(a) **Children of School Age** 20

(i) **Incapable of Receiving Education** 4

Admitted to the Occupation Centre 2

At home—In care of parents 2

(ii) **Requiring Supervision after Leaving School** 16

There were eight children who left the Educationally Sub-Normal Department of the Chaucer Special School, one left the Physically Handicapped School, and seven left ordinary schools. Fifteen of these children were in useful and suitable employment at the end of the year, but it was not possible to place the girl leaving the Physically Handicapped School, and she was subsequently admitted to the Occupation Centre.

(b) **Adults and Juveniles** 1

At home—Under the care of sister 1

(Male aged 36 years)

During the year, three cases were removed from statutory supervision, two being recommended during the year for institutional care at the request of the parent. One of these cases was subsequently admitted to a Mental Deficiency Hospital, and the other is awaiting admission. The remaining case was admitted to a Mental Deficiency Hospital as a result of action through the courts. In addition to the above, 5 died, 5 removed out of the area, and 8 were lost sight of.

At the end of the year there were 163 cases remaining under statutory supervision.

Institutional Care

Defectives recommended for institutional care are usually admitted to one of the Mental Deficiency Hospitals in the area of the Manchester Regional Hospital Board.

At the beginning of the year, eleven cases recommended in previous years for institutional care, were awaiting admission. Of these only three cases were admitted during the year.

The following table shows the number of cases recommended for institutional care, admitted to Mental Deficiency Hospitals, and still awaiting institutional care at the end of the year:—

	Recommended for Instit'nal Care			Admitted to M.D. Hospitals			Awaiting vacancies in M.D. Hospitals		
	M.	F.	T.	M.	F.	T.	M.	F.	T.
Cases prior to 1st January							6	5	11
(i) New Cases									
(a) Ascertained Cases	3	2	5	2	1	3	1	1	2
(b) Ascertained Cases (B.P.G.H.A.)	22	30	52	—	2	2	22	28	50
(ii) Other Cases									
*(a) Under Stat. Super.	—	2	2	—	1	1	—	1	1
(b) Court Action	2	2	4	2	2	4	—	—	—
	—	—	—	—	—	—	—	—	—
Total	27	36	63	4	6	10	23	30	53
At 1st January	6	5	11	2	1	3	4	4	8
	—	—	—	—	—	—	—	—	—
At 31st December	33	41	74	6	7	13	27	34	61
	—	—	—	—	—	—	—	—	—

* These two cases on Statutory Supervision were recommended for institutional care at the request of the parents.

The following table summarises the cases admitted to institutional care:—

Hospital			Age Groups				
			0-5	5-10	10-15	15-20	Over 20
Brockhall	M	...	—	—	—	1	—
Hospital	F	...	1	1	1	—	—
Calderstones	M	...	—	1	—	—	1
Hospital	F	...	—	—	1	—	1
Cranage Hall	M	...	—	—	—	1	—
Hospital	F	...	—	—	—	2	—
Royal Albert	M	...	—	—	—	1	—
Hospital	F	...	—	—	—	—	—
Swinton	M	...	—	1	—	—	—
Hospital	F	...	—	—	—	—	—
			—	—	—	—	—
Total			1	3	2	5	2
			—	—	—	—	—

Guardianship

At the beginning of the year three cases were under guardianship.

- (1) A female of forty years who has been under the guardianship of her father for many years.
- (2) A male of 22 years who was placed under the guardianship of an officer of the local health authority in August, 1949. He has continued to do well and worked steadily throughout the year, earning £5-£6 per week.
- (3) A female of nineteen years employed in the St. Saviour's Convent, Liverpool, is under the guardianship of the Sister Superior.

At the end of the year these three patients were still under guardianship.

Voluntary Supervision

At the beginning of the year there were 44 cases under voluntary supervision.

Information was received from the Board of Control that the Order of Detention under the Mental Deficiency Acts, with regard to three male patients, who were on licence, had been discharged. These patients were offered voluntary supervision. Soon after his discharge one left the area.

No cases died during the year but one was lost sight of.

At the end of the year there were 45 cases under voluntary supervision.

Taken to "Places of Safety"

There were two cases awaiting institutional care admitted into "places of safety" during the year:—

- (a) A male aged six years who, in addition to being mentally defective suffered from epilepsy with frequent fits. As his condition deteriorated, he was admitted to Boundary Park General Hospital Annexe and subsequently admitted to Calderstones Hospital on Petition.
- (b) A male aged five years was admitted to Boundary Park General Hospital Annexe owing to urgent domestic difficulties, and subsequently admitted to Swinton Hospital on Petition.

Community Care

The duties of the Mental Health Visitors include the community care and supervision of mental defectives under statutory supervision, guardianship, and on licence. During the year the following reports and visits were made:—

Progress Reports	48
Statutory Guardianship	39
Statutory Supervision	501
Initial Visits to New Cases	26

Arrangements with Adjacent Health Authorities

During the year, the West Riding County Council amended their proposals under Section 51. The modification of the proposals allows the County Council to send pupils to Occupation Centres established by other Local Health Authorities prepared to accept them.

It has been agreed that suitable cases can be accepted from the Saddleworth District into the Regent Street Occupation Centre, and a charge is made to the County Council for these cases.

No formal arrangements exist with the Lancashire County Council for children from the adjacent County Districts to be admitted to the Regent Street Occupation Centre. The Health Committee have approved the admission of children living in the Lees area or in close proximity to the Centre, provided accommodation is available. A charge is made to the County Council for such cases.

No other arrangements exist with other Local Health Authorities,

Occupation Centre

The Occupation Centre continued to function in the Regent Street Congregational Sunday School, a portion of the premises being rented for the purpose. The Centre is open each week-day except Saturday, but is closed during the ordinary school holidays. A mid-day meal is provided through the School Meals Service, a charge being made to the parents; in necessitous cases this charge is reduced or waived. Free milk is also supplied once a day to each child under eighteen years of age.

In May, arrangements were completed with the Trustees for the use of an additional room, and the following accommodation is now used:—

Large Hall,
Two classrooms,
Small classroom (for staff),
Kitchen facilities.

An Inspector of the Board of Control visited the Occupation Centre in November, but her report was not received until after the close of the year.

Miss D. E. Powell, an Assistant Supervisor, resigned in July, as she wished to attend the course for Occupation Centre Supervisors, organised by the National Association for Mental Health, and held in London. Miss E. Boyling was appointed to fill the vacancy.

During the year, there were five new admissions, three (two girls, one boy) from the Oldham County Borough, and two (girls) from the Saddleworth area. On the 31st December, there were 43 defectives on the register, 38 from the Oldham County Borough, two from the adjacent districts of the Lancashire County Council, and three from the Saddleworth District of the West Riding County Council.

The arrangements for transport of children to and from the Occupation Centre by the Ambulance Service continued and were much appreciated by the parents.

The children enjoyed two day trips to the seaside. In June, the Oldham and District Affiliated Clubs organised an outing to Southport, and in September, the Oldham Blind Children and Welfare Organisation arranged a visit to Fleetwood. These outings were most successful and our thanks are due to the members of these organisations for their generous hospitality.

Two Christmas Parties were arranged for the children, one by the Parents' Association and the other by the Oldham Blind Children and Welfare Organisation. Both were very much appreciated.

New Occupation Centre

In April, approval in principle was received from the Ministry of Health to the proposal to erect a new Occupation Centre on a vacant plot of land in Cardwell Street, subject to formal appropriation. The Mental Health Sub-Committee subsequently approved the final plans and instructed the Borough Engineer and Surveyor to obtain tenders. Tenders were submitted to the Sub-Committee in December, but as the lowest tender,

together with site works, architects' fees, furniture and fittings amounted to £33,400, compared with an estimated capital cost of £23,500, the Committee instructed the officials to report further with a view to a reduction in the capital cost, and the acceptance of a tender was deferred. Copies of the working drawings, bills of quantities, brief specifications, plans and particulars of the engineering services were subsequently submitted to the Ministry of Health.

In October, approval was received from the Ministry of Local Government and Planning for the appropriation of the Cardwell Street site for an Occupation Centre for mental defectives.

Industrial Centre

The Mental Health Sub-Committee are alive to the urgent need for the provision of an Industrial Centre for the adult defectives and the estimates for the financial year 1950-51 included an amount for equipping and opening such a centre. A number of properties were inspected but unfortunately none was found suitable for adaptation at a reasonable cost.

Home Training

No special arrangements were provided for the home training of mental defectives.

The following are the statistical returns relating to mental defectives:—

Mental Deficiency Acts, 1913 to 1938

I. Particulars of Mental Defectives as on 1st January, 1952.

	M.	F.	T.
(1) Number of Ascertained Mental Defectives Found to be "Subject to be dealt with":—			
(a) In Institutions (including cases on licence therefrom)			
Under 16 years of age	7	6	13
Aged 16 years and over	54	35	89
(b) Under Guardianship (including cases on licence therefrom)			
Under 16 years of age	—	—	—
Aged 16 years and over	1	2	3
(c) In "places of safety"	—	—	—
(d) Under Statutory Supervision (excluding cases on licence)			
Under 16 years of age.....	18	19	37
Aged 16 years and over	70	56	126
(e) Awaiting removal to an institution (Not included in (b) to (d) above)			
(i) At Home	5	6	11
(ii) In Boundary Park General Hospital Annexe	22	28	50
TOTAL ascertained cases found to be "subject to be dealt with"	177	152	329

	M.	F.	T.
(2) Number of Mental Defectives under Voluntary Supervision:—			
Under 16 years of age	—	—	—
Aged 16 years and over	28	17	45
	<hr/>		
TOTAL number of mental defectives	205	169	374
	<hr/>		
(3) Number of Mental Defectives Receiving Training:—			
(a) In day-training centres			
Under 16 years of age	13	11	24
Aged 16 years and over	6	8	14
(b) At home	—	—	—
	<hr/>		
TOTAL	19	19	38
	<hr/>		

II. Particulars of Cases Reported During the Year, 1951.

(1) Ascertainment.	M.	F.	T.
(a) Cases reported by Local Education Authorities (Section 57, Education Act, 1944):—			
(i) Under Section 57 (3)	1	3	4
(ii) Under Section 57 (5):—			
On leaving special schools	6	4	10
On leaving ordinary schools	5	3	8
(b) Other ascertained defectives reported during 1951 and found to be "subject to be dealt with"	16	29	45
	<hr/>		
TOTAL ascertained defectives found to be "subject to be dealt with" during the year	28	39	67
(c) Other reported cases ascertained during 1951 who are not at present "subject to be dealt with"	—	—	—
	<hr/>		
TOTAL number of cases reported during the year	28	39	67
	<hr/>		

III. Number of Mental Defectives in Institutions under Community Care including Voluntary Supervision or in "Places of Safety" on 1st January, 1951, who have ceased to be under any of these Forms of Care during 1951.

	M.	F.	T.
(a) Ceased to be under care	1	1	2
(b) Died	4	2	6
(c) Removed from area	6	—	6
(d) Lost sight of	4	5	9
TOTAL	15	8	23

IV. Of the Total Number of Mental Defectives known to the Local Health Authority.

(a) Number who have given birth to children during 1951 :—

(i) After marriage Nil

(ii) While unmarried Nil

	M.	F.
(b) Number who have married during 1951	3	1

SECTION IV

GENERAL MEDICAL AND DENTAL SERVICES
PHARMACEUTICAL SERVICES AND SUPPLEMENTARY
OPHTHALMIC SERVICES

Oldham Executive Council

The Oldham Executive Council consists of a Chairman (Mr. A. C. C. Robertson) and 24 other members, eight of whom are appointed by the Oldham Health Authority. Representatives are appointed for a period of three years, and Councillor W. Buckley and Councillor G. Halbert, who automatically retired on the 31st March, 1951, were re-appointed. In June, Councillor W. Buckley resigned from the Council, having accepted a post in Australia. The Health Committee appointed Councillor A. E. Stead to fill the vacancy. The following are the representatives of the Local Health Authority:—

Councillor D. C. Hanson.

Councillor G. A. Taylor.

Dr. J. T. Chalmers Keddie

(to retire 31st March, 1952).

Alderman S. T. Marron, J.P.

Alderman A. Tweedale.

Councillor E. Rothwell (from June, vice ex-Coun. W. Turner)

(to retire 31st March, 1953).

Councillor G. Halbert.

Councillor A. E. Stead (from October, vice ex-Coun. W. Buckley) (to retire 31st March, 1954).

I am indebted to Mr. F. L. Pick, Clerk of the Council, for the details contained in the following report:—

General Medical Services

The number of Oldham patients registered on all doctors' lists was 122,080 at 1st January, and 121,946 at 31st December. These figures compare with the Registrar General's estimated population for mid-June of 119,450. All the doctors practising in the County Borough are in the scheme and at the end of the year there were 86 (including assistants) on the medical list, fifty being resident in the Borough and 36 in the adjacent districts. In the previous year there were 85 doctors on the medical list, fifty being resident in the Borough and 35 in the adjacent districts. The average number of patients on the lists of doctors resident in Oldham was estimated to be 2,836 compared with 2,843 for the previous year.

At the end of the year there were 76 practitioners on the Obstetric List, a decrease of three on the previous year.

Pharmaceutical Services

All the chemists practising in the Borough are in the scheme and at the end of the year there were 53 chemists, an increase of one compared with the previous year, providing services as follows:—

Pharmacies in the area	44
Drug Stores	2
Surgical Appliance Suppliers	7

Dental Services

All the dentists in the area provide dental services under the scheme. At the end of the year 32, the same number as the previous year, were on the Dental List and 27 were resident in the Borough, the same number as the previous year.

Ophthalmic Services

The Supplementary Ophthalmic Treatment Regulations provide for patients who have obtained the necessary certificate from their medical practitioner to attend either an ophthalmic practitioner or an ophthalmic optician for eye testing and to have the required spectacles dispensed by an ophthalmic optician or a dispensing optician.

At the end of the year two ophthalmic medical practitioners, 32 ophthalmic opticians representing 26 shops or firms and one dispensing optician were providing optical services.

Finance

In May, Executive Councils were advised that consequent upon the passing of the National Health Service Act, 1951, patients were required to pay certain charges for the provision of dentures and optical appliances. The National Health Service (General Dental and Supplementary Ophthalmic Services) Regulations, 1951, which came into force on the 21st May prescribed the detailed arrangements for making and collecting the appropriate charges. In cases of hardship application could be made to the National Assistance Board for the charge to be refunded.

Charges for dentures ranged from £2 0s. 0d. for one denture with one, two or three teeth, to £4 5s. 0d. for full upper and lower dentures. Under no circumstances can the total charge exceed this latter figure.

Persons using the supplementary ophthalmic services will be required to pay towards the cost of their glasses as follows:—

- (i) The sum of £1 per pair (or 10s. 0d. if one lens only is supplied).
- (ii) The whole cost of the National Health Service frames selected for the glasses.

These charges do not apply to children up to the age of fifteen years when the standard frames are supplied.

The following amounts were recovered from members of the public for dentures and optical appliances:—

	£	s.	d.
General Dental Services	5,537	0	0
Supplementary Ophthalmic Services	11,195	7	6

The Executive Council's financial year ends on the 31st March and for the financial year ending 31st March, 1952, the expenditure totalled £403,555 which compares with £438,834 for the financial year ended 31st March, 1951.

The following is an abstract of gross payments under the respective heads for the periods stated:—

	1951-52	1950-51
Doctors—	£	£
(a) General Medical Services	103,587	104,113
(b) Maternity Services	4,930	4,295
Chemists	162,881	120,318
Dentists	88,345	124,478
Ophthalmic	36,828	80,125
Administration	6,984	5,505

The payments to doctors only relate to Oldham patients on their lists. In the case of dentists, chemists and opticians, payment is for services rendered at their surgeries or places of business, e.g., an Oldham chemist is paid by the Oldham Executive Council for all prescriptions dispensed by him whether they were on Oldham, Lancashire, West Riding, Manchester, or any other Executive Council forms. Many patients in the adjacent districts avail themselves of the pharmaceutical and optical facilities which have been developed by many progressive Oldham firms and this is reflected in the payments for these services by the Oldham Executive Council.

SECTION V

INFECTIOUS AND OTHER DISEASES

General

The feature of the year was the complete absence of diphtheria, no case being diagnosed or notified. During the pre-war years 1,232 cases and 106 deaths occurred compared with 84 cases and four deaths during the last five years. The following figures show the startling reduction in diphtheria during these years:—

Year	Cases	Deaths
1934	195	25
1935	218	29
1936	310	23
1937	275	17
1938	234	12
1947	56	3
1948	19	1
1949	8	—
1950	1	—
1951	—	—

Scarlet fever was prevalent during the last three months of the year but did not assume epidemic proportions.

The epidemic of measles which commenced in December of the previous year continued into the first four months of the year.

Dysentery was very prevalent during the first five months of the year, but only 31 cases occurred during the remainder of the year. Again a number of outbreaks were associated with day nurseries.

In January, epidemic influenza, apparently due to Virus "A" Prime, became prevalent in the country and in certain areas in the North reached epidemic proportions. Oldham did not escape but the local prevalence was not exceptionally high. The disease was mild in type and deaths were almost entirely confined to the older age groups. Deaths due to influenza and the respiratory diseases, especially bronchitis, rose sharply during January (111) and February (95), and in the first three months of the year deaths from these causes totalled 246 compared with 378 for the whole year.

No serious outbreak of food poisoning was brought to notice during the year.

In April, a communication was received from Dr. M. T. Parker, Director of the Public Health Laboratory, Monsall Hospital, Manchester, requesting the co-operation of the Medical Officer of Health in a proposed scheme for the setting up of an Enteric Information Centre. One of the objects of the Centre will be to keep observation over chronic carriers through the Medical Officers of Health concerned. Details of cases which had previously occurred in the Borough were forwarded to the Director and arrangements were made for details of any subsequent cases of Para-Typhoid and Typhoid fevers occurring in the Borough to be notified to the Director.

The Public Health (Leprosy) Regulations, 1951, came into force on the 22nd June and require a medical practitioner who is attending, or called in to visit, a person suffering from Leprosy, to notify the Chief Medical Officer of the Ministry of Health of the case by sending him a certificate in a prescribed form. Failure to send such certificate is liable to a fine not exceeding 40s. 0d. A copy of the Regulations was forwarded to each medical practitioner ascertained to be practising within the district.

The Puerperal Pyrexia Regulations, 1951, came into operation on the 1st August. They replace Regulations which have been in force in London and the remainder of the country respectively. They continue the effect of those Regulations, making Puerperal Pyrexia a notifiable disease, with slight modifications including a revised definition of Puerperal Pyrexia which the administration of the replaced Regulations has shown to be necessary. Under the new Regulations "Puerperal Pyrexia" means any febrile condition occurring in a woman in whom a temperature of 100.4 degrees Farh. (38 degrees Cent.) or more, has occurred within fourteen days after childbirth or miscarriage. A copy of the Regulations was forwarded to all medical practitioners in the area.

Attack Rates and Death Rates

	Attack Rate per 1,000 of the population England and Wales		Death Rate per 1,000 of the population England and Wales	
		Oldham		Oldham
Typhoid Fever	0.00	—	—	—
Paratyphoid Fever	0.02	—	0.00	—
Meningococcal Infection	0.03	0.04	—	0.01
Scarlet Fever	1.11	1.40	—	—
Whooping Cough	3.87	1.67	0.01	—
Diphtheria	0.02	—	0.00	—
Erysipelas	0.14	0.12	—	—
Smallpox	0.00	—	0.00	—
Measles	14.07	15.35	—	0.01
Pneumonia	0.99	0.72	0.61	0.69
Acute Poliomyelitis	0.05	0.02	0.00	—
(a) Paralytic	0.03	0.00	—	—
(b) Non-Paralytic	0.02	0.02	—	—
Puerperal Pyrexia	10.66	2.01‡	—	—
Enteritis & Diarrhœa (under 2 years of age)	—	—	1.40	3.09*
Food Poisoning	0.13	0.15	—	—

‡ Rates per 1,000 live and stillbirths.

* Rates per 1,000 live births.

Diphtheria

No cases were notified and no deaths registered.

Scarlet Fever

There were 167 cases notified compared with 245 in the previous year. No deaths were registered. Of the 167 notifications, 114 were received during the months of October, November and December.

Erysipelas

There were fifteen cases notified compared with 26 in the previous year. No deaths were registered. Of the fifteen cases notified, thirteen occurred in persons 45 years of age and over.

Enteric Fever

No cases of typhoid or paratyphoid were notified and no deaths registered.

Meningococcal Infection

During the year five cases of meningococcal meningitis were notified and confirmed. One death was registered.

Acute Poliomyelitis

In August, three cases of poliomyelitis (non-paralytic) were notified and confirmed. Of these cases, two were adult females aged nineteen and 28 years, and the other a boy of seven years.

No deaths were registered as due to poliomyelitis.

Acute Encephalitis

No cases were notified and no deaths registered.

Pneumonia

ACUTE PRIMARY PNEUMONIA

There were 52 cases notified, eleven of these being notified during the month of January. Eighteen deaths were registered.

INFLUENZAL PNEUMONIA

There were 34 cases notified and ten deaths registered. Of these cases, 27 occurred during the months of January and February. The ten deaths registered also occurred during these two months.

Influenza

There were 47 deaths registered compared with nine in the previous year. Of these, 37 were registered as due to influenza and ten to influenzal pneumonia. Of the total deaths, 44 occurred during the months of January (19) and February (25) when influenza was prevalent.

Measles

There were 1,834 cases notified compared with 1,202 in the previous year. Of these, 1,476 were notified during the first four months of the year. This was a continuance of the epidemic which began in December of the previous year.

There was one death registered as due to measles, a male aged fourteen months, who died at home.

Whooping Cough

There were 199 cases notified compared with 300 in the previous year. There was no peak period or epidemic occurrence during the year, but the highest number of cases again occurred in July, when 33 cases were notified.

No deaths were registered as due to whooping cough.

Of the 199 cases notified, nineteen had received the full course of whooping cough immunisation and these were classified as follows:—

Severe	1
Moderate	6
Mild	12

Dysentery

During the year 488 cases were notified (Sonné 460, no organism isolated 28). Of the 460 cases (Sonné dysentery) 230 were associated with outbreaks or infection in day nurseries, 69 with nursery schools or classes, eight were notified from hospitals, and 153 were sporadic and not associated with any definite source of infection. No deaths were registered as due to dysentery.

Outbreaks which occurred in day nurseries accounted for 134 Oldham cases and ten cases (eight nursery children, two staff) not resident in the Borough and notified to the Medical Officer of Health of the district concerned. There were also 68 isolated cases which occurred among nursery staff and children in the following nurseries:—

Municipal Nurseries	11
Industrial Nurseries (within the Borough)	22
Industrial Nurseries (outside the Borough) ...	35

The following is a brief summary of outbreaks that occurred in day nurseries and nursery schools:—

In January, an outbreak occurred in an industrial nursery involving seventeen nursery children (two being resident in adjacent districts), one staff, and eight home contacts (six adults, two school children). The first case to be found Sonné “positive” had suffered from diarrhœa for a few days prior to a specimen of fæces being sent for examination.

In the same month a small outbreak occurred at Derker Nursery School involving six nursery children and ten home contacts (three adults, six school children, one pre-school child).

Also in the same month cases of diarrhœa occurred in Tate Street Nursery and following investigation five nursery children, one staff, and three home contacts (two adults, one school child) were found to have Sonné dysentery.

In February, following the exclusion of a child with diarrhœa from an industrial day nursery, ten nursery children (five resident in adjacent districts), one staff and four home contacts (two adults, two school children) were found to have Sonné dysentery.

In the same month seven nursery children and four home contacts (three adults and one school child) were diagnosed as suffering from Sonn  dysentery following a visit by a Medical Officer to an industrial nursery, after notification of a case of dysentery.

Towards the end of February cases occurred at Westhill Nursery. A child absent with diarrh a was found to be Sonn  "positive" and following investigation a total of eight nursery children and two home contacts (one adult, one school child) were confirmed.

In March, a general practitioner reported three cases of diarrh a in one household. Bacteriological examination confirmed the diagnosis of Sonn  dysentery in two cases, one of which attended Limeside Nursery School. Investigation at the nursery school revealed a number of absentees with diarrh a. Specimens of f ces were requested from the staff, the children still in attendance, and the absentees. As a result of this and other investigations, eighteen nursery school children, five staff (one adjacent district), and fifteen home contacts (eight adults, seven school children) were confirmed as Sonn  dysentery.

In March and April, cases of diarrh a occurred in Haven Lane Nursery and following investigation fifteen nursery children (one adjacent district), one staff and eleven home contacts (seven adults, three school children, one pre-school child) were found to have Sonn  dysentery. It is possible that the member of the staff who was found infected was responsible for some of these cases.

In April, a child was excluded from an industrial nursery with diarrh a and a specimen of f ces was subsequently reported Sonn  "positive." Investigation at the nursery resulted in ten nursery children, one staff and six home contacts (five adults, one school child) being confirmed.

In April, the Medical Officer of Health, Royton, reported that eight Oldham children attending an industrial nursery in his district were suffering from Sonn  dysentery. No home contacts were confirmed.

In May, a girl attending St. Anne's Nursery School was notified by a general practitioner as suffering from Sonn  dysentery. Following the visit of a Medical Officer, specimens of f ces were taken from absentees, members of the staff and selected children and five further cases were subsequently confirmed.

In May, an outbreak occurred at Overens Street Nursery involving fourteen nursery children, three staff (two adjacent districts) and four home contacts (one adult, two school children, one pre-school child). The first case to be diagnosed was a member of the staff who, after commencing with diarrh a, was excluded from duty and found Sonn  "positive." Subsequently other cases rapidly occurred. On careful enquiry it was ascertained that a child who was found Sonn  "positive" had previously been allowed to remain in the nursery with diarrh a without the necessary precautions being observed. It is thought that this child was the original source of infection and infected the member of the staff concerned.

No further outbreaks of Sonn  dysentery were reported during the year.

Ophthalmia Neonatorum

During the year eight cases of ophthalmia neonatorum were notified. These were kept under observation and in no case was vision impaired.

Puerperal Pyrexia

There were four cases of puerperal pyrexia notified as follows:

Woodfield Maternity Home	1
Domiciliary	3

Smallpox

In December of last year cases of smallpox occurred in Brighton and further cases occurred in January and February. The outbreak was soon limited by the efficient action of the Medical Officer of Health and his staff but 29 cases were notified and ten deaths occurred. No contacts were reported in Oldham.

During this outbreak, in January, a male aged forty years with a suspicious chicken pox rash was reported to the Department by his general practitioner. He was seen by a Medical Officer and the opinion of Dr. D. C. Liddle of Monsall Hospital was obtained. A diagnosis of chicken pox was confirmed. Crusts from the lesions were forwarded to Professor Downie, Liverpool University, and subsequently reported negative for smallpox.

In February, the Medical Officer of Health, Port of London, advised that a passenger who disembarked at Tilbury from the s.s. "Strathmore" was admitted to hospital and subsequently regarded as a case of suspected smallpox. Three passengers from this ship were at the same time reported for surveillance. A fourth passenger who arrived in Manchester and subsequently came to Oldham was reported by the Medical Officer of Health, Manchester. The necessary action was taken with regard to these contacts and in this connection the medical officers made fifteen home visits.

In May, the Ministry of Health advised Medical Officers of Health that a student from Bombay was admitted to the Isolation Hospital at Marseilles from the s.s. "Ranchi" on the 1st May as a case of smallpox. The s.s. "Ranchi" docked at Tilbury on the 8th May but no passengers or crew were reported to the Department for surveillance.

Other Diseases

No cases of cholera, anthrax, malaria, glandular fever, undulant fever or typhus fever were brought to the notice of the Department.

In December, a case of Weil's disease (*Spirochætosis Ictero-hæmorrhagica*) was reported. The patient, a male aged 46 years, a tripe dresser employed at a tripe works in Chadderton, died in hospital after a short febrile illness which culminated in severe jaundice and multiple ecchymosis. The diagnosis was bacteriologically confirmed; the post-mortem findings were consistent with Weil's disease, and the place of work was heavily rat infested. The circumstances of this death were reported to the Coroner and at the inquest the jury returned a verdict of death due to Weil's disease contracted in the course of his employment.

FOOD POISONING

Section 17 of the Food and Drugs Act, 1938, requires a medical practitioner to notify the Medical Officer of Health of any patient who he is attending if he becomes aware, or suspects, that such patient is suffering from food poisoning.

In all cases of food poisoning or suspected food poisoning full enquiries are made to ascertain the source of infection. If any suspected food is available samples are submitted for bacteriological examination. Contamination by rodents is also fully investigated in cases due to *Salm. typhi-murium*.

During the year, eighteen cases of food poisoning were notified and in eleven of these cases *Salm. typhi-murium* organisms were isolated from the fæces of the patient.

In seven cases no organisms could be isolated from the patients or suspected foods. Three of these cases occurred in the same family, father, mother and son aged eight years being affected with severe diarrhœa. Two other cases were husband and wife who developed severe diarrhœa and vomiting. The remaining two cases were isolated, a female aged twenty years and a male aged 36 years.

The following are brief details of the cases in which *Salm. typhi-murium* organisms were isolated from the fæces of the patient and involved five households :—

1. A female aged two years suspected to be suffering from dysentery was excluded from an industrial nursery in an adjacent district. Following examination of the fæces, *Salm. typhi-murium* organisms were isolated. Specimens of fæces from the home contacts resulted in the father of the child being found *Salm. typhi-murium* "positive." The phage was undetected.
2. A male, aged one year, developed diarrhœa and the practitioner attending sent a specimen of fæces for examination which was reported *Salm. typhi-murium* "positive." Following bacteriological examination of the household, a male aged three years was found *Salm. typhi-murium* "positive." The phage in both cases was A2 + B2.
3. A boy aged eighteen years, attending a boarding school, on return from a holiday in France, developed diarrhœa and *Salm. typhi-murium* organisms were isolated from the fæces. The phage was undetected.
4. An infant of ten months was admitted to hospital with diarrhœa and subsequently *Salm. typhi-murium* organisms were isolated from the fæces. Following investigations at the home of the patient *Salm. typhi-murium* organisms were isolated from the fæces of a boy aged one year seven months. There was gross overcrowding and lack of hygiene in the home, but no specific source of infection was found. The phage in both cases was B6.
5. A male, aged one year six months, was notified suffering from diarrhœa and vomiting suggestive of food poisoning and *Salm. typhi-murium* organisms were subsequently isolated from the fæces. On investigation it was found that another member of

the family, a male aged three years, who had an attack of diarrhoea and vomiting some ten days before was also *Salm. typhi-murium* "positive." Just prior to becoming ill this child visited and stayed the night with a family in the Saddleworth district. An infant of this Saddleworth family the same evening developed diarrhoea and vomiting. The Medical Officer of Health, Saddleworth, was contacted and it was found that this child had since been admitted to hospital and a diagnosis of *Salm. typhi-murium* infection was confirmed. It is considered that this child was the original source of infection of the Oldham family in which two subsequent cases (boys aged six and twelve years) were confirmed. Information was subsequently received that a further case occurred in the Saddleworth household.

In all, six cases occurred in these two households. Cultures from each case were sent for phage typing and it is interesting to record that all were reported phage B2.

TABLE SHOWING THE NUMBER OF CASES OF CERTAIN DISEASES NOTIFIED AND THE DEATHS REGISTERED FROM THESE DISEASES DURING THE SEVERAL MONTHS OF THE YEAR.

Months	Measles		Scarlet Fever		Diphtheria		Dysentery (Sonné)		Food Poisoning		Meningococcal Infections		Acute Poliomyelitis		Whooping Cough		Erysipelas		Acute Primary Pneumonia		Acute Influenzal Pneumonia	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
Jan.	386	...	10	...	...	...	82	...	1	...	...	...	...	...	19	...	1	...	11	4	11	6
Feb.	320	...	5	...	...	...	66	...	...	...	...	...	...	...	19	...	...	...	16	3	...	4
March	429	1	2	...	...	...	154	...	2	...	...	...	...	...	15	...	1	...	2	1	...	...
April	341	...	6	...	...	...	65	...	2	...	...	...	...	...	15	...	2	...	4	1	1	...
May	175	...	5	...	...	...	62	...	4	...	...	...	...	...	26	...	4	...	4	3	2	...
June	76	...	5	...	...	...	10	...	1	...	...	...	...	...	21	...	2	...	...	...	...	...
July	53	...	2	...	...	...	9	...	2	...	...	...	...	...	33	...	1	...	...	1	...	...
Aug.	26	...	5	...	...	...	3	...	...	...	...	...	3	...	12	...	...	...	...	1	...	...
Sept.	13	...	13	...	...	...	3	...	2	...	...	...	...	...	9	...	1	...	3	1	...	...
Oct.	5	...	16	...	...	...	...	...	4	...	...	...	...	...	8	...	1	...	2	...	...	...
Nov.	2	...	43	...	...	...	...	...	...	...	...	...	...	...	12	...	1	...	5	2	...	...
Dec.	8	...	55	...	...	...	6	...	...	...	...	...	...	...	10	...	1	...	10	1	1	...
Totals	1834	1	167	...	...	...	460	...	18	...	5	1	3	...	199	...	15	...	52	18	34	10

Smallpox. None.
Typhoid. }
Para-Typhoid. }
Epidemic Encephalitis (Encephalitis-Lethargica). None.
Puerperal Pyrexia. 4 cases. No Deaths

TABLE SHOWING CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1951.

Notifiable Disease	Notification in Age Groups									Notifications in the Various Wards of the Borough.											
	Under 1.	1 and under 3.	3 and under 5.	5 and under 10.	10 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	65 and upwards.	St. Mary's.	St. Peter's.	Verneth.	Westwood	St. Paul's.	Coldhurst.	Hartford.	Hollinwood.	Clarksfield.	Mumps.	St. James'.	Waterhead.
Scarlet Fever	23	18	38	63	39	3	6	1	...	9	1	12	31	20	16	13	22	18	2	9	14
Whooping Cough...	...	52	65	56	2	...	...	...	...	20	9	17	12	22	8	8	18	28	6	29	22
Diphtheria	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles	95	618	721	384	8	4	4	...	...	129	91	154	150	224	102	121	194	225	59	145	240
Acute Pneumonia	2	8	6	7	4	...	11	23	25	13	7	4	6	8	8	4	8	6	6	8	8
(Primary or Influenzal)	2	2	1	...	...	...	...	...	...	...	1	1	...	1	...	...	...	1	1	...	...
Meningococcal Infection	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Acute Poliomyelitis—	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Paralytic	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	2	...	...
Non-Paralytic	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Acute Encephalitis—	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Infective	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Post Infective	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Dysentery...	18	133	102	62	27	33	87	19	7	32	44	33	19	39	29	22	49	61	23	54	83
Ophthalmia Neonatorum	8	...	...	...	...	...	...	...	...	...	...	1	...	4	1	1	...	...	...	...	1
Puerperal Pyrexia	...	...	...	...	...	3	1	...	...	...	...	1	...	...	...	...	...	...	...	...	2
Para-Typhoid Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Typhoid Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Food Poisoning	1	5	1	2	1	2	6	...	...	...	2	3	...	4	2	...	...	4	...	3	...
Erysipelas...	...	...	...	...	...	...	2	10	3	...	...	2	3	2	...	1	1	2	...	3	1
Respiratory Tuberculosis	3	3	2	4	1	24	42	13	4	6	9	10	7	16	3	5	9	6	1	7	17
Other Forms of	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculosis	...	...	1	4	3	9	3	1	2	1	1	2	4	3	3	...	1	4	...	1	3
Totals	152	839	937	583	85	79	163	67	41	210	165	240	232	343	173	176	302	355	100	259	391

TUBERCULOSIS

No material change occurred in the Tuberculosis Services provided for the Borough. Out-patient diagnosis and preventive work is carried out at the Barker Street Chest Clinic and in-patient treatment is provided at Strinesdale Sanatorium and other hospitals and sanatoria outside the Borough, details of which are given in the table "Sanatorium and Hospital Treatment."

The Chest Clinic

Attendances at the Chest Clinic, compared with the two previous years, were as follows:—

	1949	1950	1951
Adults	2708	2846	2827
Children	1023	1101	1333
	<hr/>	<hr/>	<hr/>
	3731	3947	4160
	<hr/>	<hr/>	<hr/>

The tuberculosis health visitor paid 1,407 visits to the homes of patients.

Deaths

The number of deaths registered, 37 (32 pulmonary and five non-pulmonary), gives a rate per thousand of the population of .31 (.27 pulmonary and .04 non-pulmonary) compared with 47 (39 pulmonary and eight non-pulmonary) and a rate of .39 (.32 pulmonary and .07 non-pulmonary) for the previous year.

The Tuberculosis Register

The total number of accepted cases on the Register on the 31st December was 677. Of these, 59 had had a positive sputum during the latter six months.

During the year, 108 cases were removed for the following reasons:—

1. Recovered	46	or 42.6% of total removals
2. Removal out	22	} or 25.0% of total removals
3. Not desiring further treatment	0	
4. Lost sight of	2	
5. Diagnosis not confirmed	3	
6. Deaths	35	or 32.4% of total removals

Of the 46 recovered cases, 22 were pulmonary (17 or 77.3% minus, 4 or 18.2% R.B.2., and 1 or 4.5% R.B.3.).

Of the 35 deaths, 34 were pulmonary cases, classified as follows:—

Minus 5 or 14.7%	R.B.2. 18 or 52.9%
R.B.1. 2 or 5.9%	R.B.3. 9 or 26.5%

Pulmonary Tuberculosis

New Cases

There were 100 new cases placed on the Register compared with 75 for the previous year. These were classified as follows:—

R.A.1. (Early cases, sputum negative or absent)	33
R.A.2. (Intermediate cases, sputum negative or absent)	13
R.A.3. (Advanced cases, sputum negative or absent)	0

R.B.1. (Early cases, sputum positive)	10
R.B.2. (Intermediate cases, sputum positive)	35
R.B.3. (Advanced cases, sputum positive)	9

In addition four other cases came to notice, but were not placed on the Register.

Deaths

During the year, 32 patients, compared with 39 for the previous year, died from pulmonary tuberculosis. This represents a death rate of 0.27 per thousand of the population.

In addition, eight pulmonary cases died from causes other than tuberculosis.

Of these 32 deaths, ten or 31.3 per cent had been notified more than five years. A further five or 15.6 per cent had been notified three to five years, whilst five or 15.6 per cent died one to three years after notification. The remaining twelve (37.5 per cent of total) occurred within one year of coming to notice and included four which escaped statutory notification; two being notified posthumously and two coming to notice through the local registrar's returns. The following table shows the length of time between notification and death of the remaining eight:—

Under 1 week	1
1 to 4 weeks	2
1 to 2 months	Nil
2 to 3 months	Nil
3 to 6 months	3
6 to 9 months	1
9 to 12 months	1

Thus, of the 32 patients dying during the year, 22 or 68.7 per cent died within five years of coming to notice.

Non-Pulmonary Tuberculosis

New Cases

The number of new cases placed on the Register during the year was sixteen. In addition, four other cases came to notice. These compare with nineteen and four for the previous year.

The following table shows the localisation of the disease in recent years:—

	1951	1950	1949
Bones and Joints	5	5	5
Abdomen	1	5	5
Meninges	1	1	4
Peripheral Glands	5	5	6
Other Organs	1	—	3
Skin	1	3	2
Generalised	2	—	—
Totals	16	19	25

Deaths

There were five deaths compared with eight for the previous year. This represents a death rate of 0.05 per thousand of the population.

The localisation of the disease was as follows:—

Miliary (acute)	1
Meninges	1
Bones and Joints	1
Kidney	2

Summary of New Cases and Deaths during the Year.

Age Groups	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	Male	Fem.	Male	Fem.	Male	Fem.	Male	Fem.
0 to 1	1	...	...	1	...	...	...	...
1 to 5	3	5	1	...	1	...	...	...
5 to 10	3	...	1	3	...	1	...	1
10 to 15 ... ..	...	1	...	1	...	...	...	...
15 to 20	3	6	1	1	...	...	...	...
20 to 25	5	10	2	3	...	1	...	...
25 to 35	14	15	...	2	2	...	...	1
35 to 45	13	5	...	...	5	2	1	...
45 to 55	7	...	1	1	10	...	...	1
55 to 65	10	1	...	...	4	...	...	...
65 plus	2	...	...	2	4	2	...	1
Totals	61	43	6	14	26	6	1	4

1951	104	...	20	...	32	...	5
1950	82	...	23	...	39	...	8
1949	89	...	34	...	39	...	9
1948	100	...	33	...	49	...	13

The following is a summary of the occupations of new cases:—

	Pulm.	Non-Pulm.
Cotton Operatives	21	3
Household Duties	16	6
Children under school age	8	2
School children	5	5
No occupation	3	—
Labourers	11	—
Clerks	10	1
Engineers, fitters, &c.	11	—
Transport workers	3	—
Brass and sheet metal workers	1	—
Light assembly workers	2	—
Nurses	1	1
Porters	—	1
Machinists	1	1
Other occupations	11	—
Totals	104	20

RETURN OF CASES ON THE TUBERCULOSIS REGISTER.

	Pulmonary			Non-Pulmonary			Totals			Grand Totals
	Male	Female	Ch'n.	Male	Female	Ch'n.	Male	Female	Ch'n.	
1. No. of definite cases of Tuberculosis on Register at 1st January	272	201	29	44	60	51	316	261	80	657
Transfers from other areas	7	5	...	1	...	...	8	5	...	13
"Lost sight of" cases returning	...	...	...	...	...	...	...	...	...	...
2. No. of new cases diagnosed during year as:										
Class A (T.B. Minus)	21	14	11	2	4	6	23	18	17	58
Class B (T.B. Positive)	31	23	...	2	2	...	33	25	...	58
No. of cases included in 1 and 2 written off the Register during the year:										
(1) Recovered	16	5	1	8	9	7	24	14	8	46
(2) Dead (all causes)	28	6	...	...	1	...	28	7	...	35
(3) Removed to other areas	3	12	2	...	3	2	3	15	4	22
(4) For other reasons	2	1	...	...	2*	1	2	3	1	6
No. of definite cases of Tuberculosis on Register at 31st December	282	219	37	41	51	47	323	270	84	677

* This figure includes one non-pulmonary transferred to pulmonary.

SANATORIUM AND HOSPITAL TREATMENT.
The following table summarizes the number of patients receiving hospital and sanatorium treatment during the year.

Table I. Pulmonary Cases.

	In-patients 1st January			Admissions			Discharges			Deaths			In-patients 31st December		
	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.
Strinesdale Sanatorium	27	27	...	28	45	...	28	54	...	8	1	...	19	17	...
Abergele Sanatorium	...	...	...	...	...	4	...	...	...	...	...	...	...	...	4
Aitken Sanatorium, Bury	...	...	...	2	5	...	2	4	...	...	...	...	...	1	...
Baguley Hospital	...	...	...	6	6	...	4	6	...	...	...	...	2	...	...
Chadderton Pulmonary Hospital	...	1	...	...	5	...	...	4	...	...	...	...	...	2	...
Elswick Sanatorium, Kirkham	...	1	...	3	6	...	2	7	...	...	...	...	1	...	...
Fall Birch Hospital, Bolton	...	...	...	...	1	...	...	1	...	...	...	...	...	...	...
Florence Nightingale Hospital, Bury	...	...	...	...	1	...	...	1	...	...	...	...	...	...	...
Hefferston Grange Sanatorium, Weaverham	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
High Carley Sanatorium, Ulverston	...	...	...	1	2	1	1	2	...	...	...	...	...	...	1
Hyde Hospital	...	...	...	7	6	1	2	1	...	...	...	...	5	5	1
Lancaster Hospital...	1	...	...	1	...	...	...	...	...	1	...	...	1	...	...
Macclesfield Hospital	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Manchester Royal Infirmary	...	...	...	...	1	...	...	1	...	...	...	...	...	...	...
Nab Top Sanatorium, Marple...	...	...	...	2	2	...	2	1	...	...	...	...	...	1	...
Peel Hall Hospital, Little Hulton	...	...	...	3	...	...	1	...	...	1	...	...	1	...	...
Polish Hospital No. 4, Iscoyd Park	1	...	...	...	...	...	...	...	...	...	...	...	1	...	...
Westmorland Sanatorium, Grange- over-Sands	...	...	...	4	4	...	...	1	...	...	...	...	1	3	...
Withnell Hospital, Chorley	...	...	...	3	...	...	1	...	...	...	...	...	2	...	...
Wolstenholme Pulmonary Hospital, Rochdale	1	...	...	5	...	...	6	...	...	...	...	...	...	...	...
Switzerland	2	...	...	2	...	...	2	...	...	...	...	...	2	...	...

Table II. Non-Pulmonary Cases.

The Robert Jones and Agnes Hunt Orthopaedic Hospital, Oswestry	1	3	...	3	1	3	3	3	...	...	...	...	1	1	...
Wrightington Hospital	...	...	5	2	2	3	1	...	4	...	...	...	1	2	4

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1930.
 Part I.—Summary of Notifications, during the year.

Age Periods		Formal Notifications.												
		Number of Primary Notifications of new cases of Tuberculosis.												
		0 to 1	1 to 2	2 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 & upwards
Pulmonary Males	...	1	1	1	3	...	2	6	16	10	4	9	4	...
Females	...	2	...	3	1	1	5	11	12	4	..	...	...	...
Non-Pulmonary Males	...	...	...	1	1	1	2	1	...	...	1	...	...	...
Females	...	...	...	...	3	2	2	4	3	...	...	...	2	...
TOTALS	...	3	1	5	8	4	11	22	31	14	5	9	6	...
														119

Part II—New Cases of Tuberculosis coming to the knowledge of the Medical Officer of Health, during the above-mentioned period, otherwise than by formal notification.

Supplemental Return.

Age Periods	0—1	1—2	2—5	5—10	10—15	15—20	20—25	25—35	35—45	45—55	55—65	65—75	75 and up.	Total (all ages)
Pulmonary Males	2	4	1	3	2	...	...	12
Females	1	1	3	1	1	...	...	...	...	...	7
Non-Pulmonary Males	1	...	...	...	...	...	...	1	...	...	...	2
Females	2	...	...	...	...	...	1	...	...	1	4
TOTALS	1	3	...	1	5	5	2	5	2	...	1	25

Source of Information	No. of Cases	
	Pulmonary	Non-Pulmonary
Death Returns from Local Registrars
Transferable Deaths from Registrar General
Posthumous Notifications
“Transfers” from other areas (other than transferable deaths)
Other Sources
TOTALS...	19	6

CANCER

The number of deaths attributed to cancer show a decrease of 54 compared with 1950.

The figures for the last five years are as follows:—

1947	.....	246
1948	.....	238
1949	.....	276
1950	.....	278
1951	.....	224

The following is an analysis of the age and sex distribution of all persons who were certified as dying from cancer during the year:—

Ages	Males	Females	Total
0-15	—	3	3
15-25	—	2	2
25-35	—	—	—
35-45	3	7	10
45-55	19	15	34
55-65	28	20	48
65-75	35	40	75
75+	24	28	52

Localisation of the Disease

Buccal Cavity and Pharynx	{	Tongue	1
		Mouth (Alveolus)	1
		Postericoid (Hypopharynx) ...	1
		Pharynx	1
Digestive Organs & Peritoneum ...	{	Œsophagus	5
		Stomach	50
		Large Intestine	24
		Rectum	22
		Biliary Passages & Liver ...	7
		Pancreas	6
		Peritoneum	1
Respiratory System	{	Larynx	5
		Trachea, Lung & Brönchus ...	28
Breast			19
Genito-Urinary Organs	{	Cervix & Uterus	15
		Ovary	7
		Vulva	1
		Prostate	5
		Scrotum	1
		Kidney	5
		Bladder	8

Other and unspecified sites	Brain	3
	Thyroid	1
	Bones (including jaw bone)	2
	Neck	1
	Carcinomatosis	1
	Pelvic Tumour	1
	Skin	2

VENEREAL DISEASES

The following figures relate to Oldham patients attending for the first time at a treatment centre, and are extracted from records received from the Consultant Venerologist in charge of the Centre:—

	Oldham	Rochdale	Salford	Ashton	Manchester	Bolton	Bury	Total
Syphilis	35	3	...	...	1	...	1	40
Gonorrhœa	43	6	2	1	...	...	...	52
Non-Venereal and Undiagnosed Conditions	146	5	3	...	1	1	1	157
Total	224	14	5	1	2	1	2	249

SECTION VI

SANITARY CIRCUMSTANCES OF THE AREA

WATER SUPPLY

The Waterworks Engineer and General Manager (Mr. C. Busfield) has kindly supplied the following particulars:—

“During the year 1951 a constant supply of water of a high standard of purity was maintained to all premises within the Department's area of supply, which are supplied through the Department's domestic distribution system.

Practically all dwellinghouses within the Department's area of supply, numbering about 67,950, are connected direct to this Department's mains and very few supplies are provided by means of common stand pipes. The estimated population in the Department's area of supply is 216,000.

The pH values of the water supplied from the Piethorne and Hanging Lees sources, all of which is unfiltered, varied between 5.8 and 7.2. The pH values of the water supplied from the Castleshaw source, which is filtered, ranged between 6.9 and 8.0, and the pH values of the water supplied from the Readycon Dean source, which is also filtered, ranged between 6.7 and 9.0. No cases of contamination by lead of the water supplied were noted, but special measures were taken, as required, to counteract the occasional increase in the acidity of the water supplied from the Hanging Lees source.

All water supplied from the Department's two reservoirs at Strinesdale, which is utilised for trade purposes only, is sterilised by the addition of chlorine.

During the year samples of water collected at source were submitted for chemical and bacteriological examination as follows:—

Reservoir	Chemical	Bacteriological	Remarks
Piethorne			
Raw Water	1	1	35 B. Coli per 100 ml.
		1	1 „ „
		3	0 „ „
After Sterilisation	5	1	3 B. Coli per 100 ml.
		1	1 „ „
		13	0 „ „
Hanging Lees			
Raw Water	1	5	0 B. Coli per 100 ml.
After Sterilisation	5	15	0 „ „
Castleshaw			
Raw Water	1	1	5 B. Coli per 100 ml.
		1	1 „ „
		3	0 „ „
After Sterilisation	5	13	0 B. Coli per 100 ml.
Readycon Dean			
Raw Water	1	1	180+ B. Coli per 100 ml.
		3	1 „ „
		1	0 „ „
After Sterilisation	5	1	2 B. Coli per 100 ml.
		2	1 „ „
		11	0 „ „

DRAINAGE AND SEWERAGE

I am indebted to Mr. J. Taylor, the Sewage Works Manager, for the following report:—

“The method of treatment did not alter during the year consisted of:

- (1) Detritus Tanks,
- (2) Sedimentation Tanks,
- (3) Bio-Flocculation Tanks,
- (4) Percolating Filters and Humus Tanks,
- (5) Storm-Water Tanks,
- (6) Sludge Digestion and Drying Beds.

The above process was first used in the year 1938 and, except for a small portion, the sewage reaches the Works by gravitation.

Treatment facilities in the detritus tanks were adequate and most of the grit in the sewage settled out there. It was found necessary, however, to renew the chains on the screens.

The Bio-Flocculation Plant gave consistently good results except during periods of warm, dry weather, when the activated sludge had a tendency to deteriorate quickly. This was very noticeable if the percentage of sludge being carried exceeded three, after one hour settlement, provided this figure was maintained both a good sludge and a well clarified effluent resulted. Once the activated sludge had deteriorated, no normal means of revitalisation was of any use and the complete evacuation of the plant became necessary; the plant then being re-started and a new supply of activated sludge built up. Air-tiles in the whole of the units were cleaned as a matter of routine, no excessive clogging of the tiles took place but a good number of them were broken and these were re-placed by new tiles.

Effluents leaving the percolating filters and entering the brook remained on the average fair throughout the year; the humus tanks are not of very great capacity and at times the amounts of suspended matter contained in the effluents were excessive.

Insecticides for the control of filter flies were again used periodically from March until August, the results obtained being good. Chlorination was also used at various points in the Purification Plant.

Period samples of the final effluents were taken by the Inspector of the Lancashire Rivers Board, all of which were classed as satisfactory.

The whole of the raw sludge from the Works was given full treatment in the heated sludge digestion tanks; the tanks were maintained at a temperature of approximately 80°F., good digestion was obtained, the gas production averaged 70,000 cubic feet per day.

Shortage of labour throughout the year definitely retarded the removal of sludge cake from the drying beds, and in the latter part of the year it was decided to purchase a mechanical shovel for this work.

The new sludge storage lagoon for digested sludge was brought into use towards the end of the year. This storage capacity will be very useful in wet weather when sludge cake cannot be removed from the drying bed area.

Detritus and screenings were tipped and covered over, the sludge drying beds were in use throughout the year. 35,000 tons of raw sludge, equal to 14.2 tons per million gallons of sewage, were removed from the Sedimentation Tanks, the drying beds yielded 4,500 tons of sludge cake.

Sewage Flow :

The total amount of sewage received for treatment during the year was 2,468,426,000 gallons, which is equal to an average daily flow of 6,763,000 gallons."

PUBLIC CLEANSING

The Director of Public Cleansing (Mr. A. Millward) has kindly supplied the following particulars:—

"There are no ashpits in the Borough. All the house refuse from the 40,727 ash cans is collected by motor vehicles. 74.89 per cent is dealt with by tipping under the controlled system and the remainder by separation and incineration at the Refuse Disposal Works.

A free dustbin scheme for the removal of refuse was adopted by the Corporation on the 15th June, 1950, and from that date to the 31st December, 1951, 6,855 dustbins have been supplied.

There is only one Refuse Disposal Works, and this is situated at Rhodes Bank. The Cleansing and Transport Committee intend to proceed with the erection of a new Refuse Disposal Works on the Glodwick Road Site at some future date and this will replace the existing works at Rhodes Bank.

The conversion of the sanitary pail closets to the fresh-water system by the Borough Engineer's Department is now proceeding satisfactorily considering the many engineering difficulties in the way.

There are 164 miles of streets in the Borough, cleansed as follows:—

Daily	6 miles
Once weekly	120 miles
Less than once weekly	38 miles

Miles of streets cleansed (exclusive of footpaths) 20,802

Gully Cleansing:—

Number of gullies	19,012
Number of cleansings during the year	49,323

The following figures indicate the amount of work done during the year:—

House and Trade Refuse Collection

Number of Dustbins emptied	2,147,370
Number of Dustbins supplied under free dustbin scheme	3,872
Number of Sanitary Pails emptied	11,728
Number of Collections of Garbage	21,944
Number of Loads of Excreta collected	204
Number of Loads of Garbage collected	688
Number of tons of ashes taken to Refuse Disposal Works	7,533
Number of tons of ashes taken to Corporation Tips	22,475
Number of tons of Clinker, etc., removed from Refuse Disposal Works	4,196
Number of tons of Baled Tins sold	314
Number of tons of Mortar sold	154

Waste-Water Closets and Latrines

Blockages cleared (W.W.C.s)	4,679
Blockages cleared (latrines)	--
Drains cleared	71
Drains found blocked, requiring excavating	450
Tippers found not working and re-adjusted	86
Tippers, fittings, etc., found broken	2,050
New Tippers, fittings, etc., fixed	1,538
Visits paid, flushing latrines, etc.	6,180

Closet Accommodation

The total number and type of closets in the Borough at the end of the year were as follows:—

Fresh-Water Closets	19,139
Waste-Water Closets	23,927
Latrines	428
Pail Closets	165 "

SWIMMING BATHS AND POOLS

The General Superintendent of Baths (Mr. C. Murray) has kindly supplied the following particulars:—

“During the year ended 31st December, 1951, the water in the whole of the Corporation Swimming Baths has been maintained in accordance with the Ministry of Health maximum requirement with regard to **marginal** chlorination and maintenance of correct pH values.

At the Central, Robin Hill, Waterhead and Lowermoor Establishments, where the chlorinating apparatus is capable of dealing with the increased amounts of chlorine necessary for the operation of the **Breakpoint Chlorination** technique, this method of sterilisation is used as an additional safeguard at peak periods. The smaller type of chlorinator in use at the Hollinwood, Hathershaw and Glodwick Baths will be replaced with the larger type when circumstances permit.

The continued use of coke as boiler furnace fuel is being maintained at the Central, Lowermoor, Hathershaw and Glodwick Establishments, where the steam demand allows this type of fuel to be used under conditions of reasonably slow combustion, and as these Establishments are in close proximity to the main roads in the Town, with considerable residential property in the districts, the mitigation of the smoke nuisance from these boiler plants is of some consequence, particularly so with regard to Central Baths.

During the past year the whole of the Baths and Wash-house premises and appurtenances have been maintained in a satisfactory hygienic condition.”

GENERAL SANITARY INSPECTION

To the Medical Officer of Health,

Sir,

I have pleasure in submitting my report for the year 1951.

During the year, Mr. L. Moorhouse and Mr. S. V. Robinson resigned to take up similar appointments elsewhere and Mr. A. Renshaw and Mr. J. Smith were appointed Assistant Sanitary Inspectors.

I am pleased to be able to report the success of Mr. E. C. Elford, Mr. L. Moorhouse and Mr. T. T. Boardman in obtaining the Meat and Other Foods Certificate of the R.S.I., and also of Mr. A. Renshaw, Clerk in the Sanitary Section, in obtaining the Sanitary Inspector's Certificate of the R.S.I. and S.I.E.J.B.

During the year the attention of the Health Committee was drawn to the difficulties in enforcing the statutory powers in connection with the repair of houses. The implementation of Section 9 of the Housing Act, 1936, in particular has become almost impossible due to increased costs of repairs, and it is urgently necessary for a review of the Rent Restrictions Acts to meet these extraordinary circumstances. The effect of not being able to implement Section 9 is such that it is bringing houses within the scope of Section 11 of the Housing Act, 1936, thus increasing the number of houses for demolition. As far as the County Borough of Oldham is concerned there are some 10,000 unfit houses, and as it is not practicable to deal with these in any great number for some considerable time, the question of maintenance and re-conditioning of houses is one of great concern. The failure to properly implement Section 9 is therefore having a serious effect on the housing situation in this Borough.

It will be seen that the improvements to ice cream premises during the past three years has resulted in the satisfactory product that is now being produced by the local ice cream manufacturers.

In conclusion I wish to tender to yourself and the members of the staff my sincere thanks for the willing help and co-operation I have received during the year.

Yours respectfully,

HAROLD V. CASS,
Chief Sanitary Inspector.

Summary of Work Carried Out by Sanitary Inspectors

During the year, 8,646 visits and 2,315 re-visits, as shown below, were made by the Sanitary Inspectors in connection with inspections under the various Acts:—

Inspections				
General		Visits	Re-visits	Total
Accumulations		78	39	117
Closets—Water		133	97	230
Waste Water		604	34	638
Pail		3	—	3
Drainage		504	270	774
Drain Tests		586	213	799
Public Sewers		189	92	281
Dustbins		1	2	3
Entertainment Houses		—	—	—
Factories—Mechanical		54	13	67
Non-Mechanical		4	1	5
Offices and Workplaces		—	—	—
Outworkers		10	1	11
Interviews		713	103	816
Keeping of Animals and Birds		15	4	19
Mill Lodges		6	10	16

	Visits	Re-visits	Total
Marine Stores	2	—	2
No Access	1323	569	1892
Offensive Trades	19	—	19
Rag Gatherers	3	2	5
Rats and Mice	492	317	809
Schools	10	2	12
Shops Act	6	—	6
Water Supply	116	153	269
Yards and Courts	—	1	1
Overcrowding	151	20	171
Tents, Vans and Sheds	30	26	56
Houses let in lodgings	11	—	11
Smoke Abatement Visits	22	1	23
Common Lodging Houses	5	—	5
Public Houses	139	139	278
Rag Flock Acts	13	—	13
Fertilisers and Feeding Stuffs Act	7	—	7
Diseases of Animals Acts	33	—	33
Miscellaneous	1045	85	1130
Food Premises			
Slaughterhouses	948	—	948
Meat Shops	85	—	85
Markets	26	2	28
Wharves	—	—	—
Food Preparation Premises	188	20	208
Ice Cream Premises	125	—	125
Restaurants and Cafes	66	37	103
Fish Fryers	13	—	13
Fishmongers and Poulterers	22	—	22
Grocers	301	2	303
Greengrocers	28	1	29
Cold Stores	5	—	5
Bakehouses—Mechanical	230	51	281
Non-Mechanical	16	—	16
Milk and Dairies Regulations	32	—	32
Infectious Diseases enquiries	200	5	205
Food Poisoning	34	3	37
Disinfection	—	—	—
	<hr/> 8646	<hr/> 2315	<hr/> 10961

Summary of Action Taken and Work Carried Out

Number of cases taken in Court	2
Number of cases reported to Committee	2035
Number of complaints received	1456
Matters referred to other Departments	484
Number of letters to owners, etc.	1236
Number of Rent Restrictions Certificates issued	—
Number of Preliminary Notices served	2073
Number of Statutory Notices served	731
Disrepair	
Roofs repaired or renewed	229
Walls and chimneys repaired or rebuilt	190
Wall Plaster repaired or renewed	166

Ceiling Plaster repaired or renewed	88
Floors repaired or relaid	27
Windows repaired	102
Extra lighting provided	—
Ventilation provided or improved	28
Ranges or fireplaces repaired, re-set or renewed	35
Staircases repaired or renewed	9
Handrails provided or repaired	4
Doors repaired	62
Food Stores provided or altered	—
Washing accommodation provided or repaired	2
Rooms cleansed or redecorated	1
Contents of rooms cleansed or destroyed	—
Dampness remedied—Rising	25
Penetrating	23
Outbuildings repaired	29
Courts, yards and passages—paved or repaved	10
Cleansed	5
Obstructive buildings removed	—
Sanitary Defects	11
Drainage—Cleansed	118
Repaired or altered	175
Reconstructed	24
Provided	5
Public Sewers—Cleansed	14
Repaired or altered	6
Reconstructed	—
Eaves gutters repaired or renewed, cleansed	279
Rain water pipes—repaired or renewed	146
Disconnected	26
Sinks renewed or provided	16
Sink Waste pipes repaired or renewed	53
Water closets—provided	11
Repaired	47
Cleansed	18
Waste Water Closets—Repaired	171
Cleansed	62
Closets converted to water closets (or abolished)—Latrine	1
Pails	—
Waste Water ...	66
Other closets—Provided	1
Repaired	6
Cleansed	—
Soil pipes repaired or renewed	2
Water supply provided or improved	89
Miscellaneous	
Dustbins—repaired or renewed	—
Extra provided	—
Nuisances abated—Animals and Birds	5
Accumulations	27
Other conditions	2
Information in rent books	4

Factories Acts, 1937 and 1948

In accordance with Section 128 of the Factories Act, 1937, the following particulars under Part I and Part VIII of that Act are submitted:—

I.—INSPECTIONS for purposes of provisions as to health (including inspections made by Sanitary Inspectors).

Premises (1)	M/c. line No. (2)	Number on Register (3)	Number of		
			Inspec- tions (4)	Written notices (5)	Occupiers prosecuted (6)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities ...	1	N.Mech. 107	4	5	...
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	2	Mech. 709	54		...
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers premises)	3	...	...	...	...
TOTAL		816	58	5	...

II.—Cases in which defects were found.

Particulars	M/c. line No.	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
		Found	Remedied	Referred		
				To H.M. Inspector	By H.M. Inspector	
(1)	(2)	(3)	(4)	(5)	(6)	(7)
Want of cleanliness (S.1)	4	...	...	...	...	...
Overcrowding (S.2)	5	...	...	...	...	...
Unreasonable temperature (S.3) ...	6	...	...	...	...	...
Inadequate ventilation (S.4)	7	...	...	...	...	...
Ineffective drainage of floors (S.6)	8	...	...	...	...	...
Sanitary Conveniences (S.7)						
(a) Insufficient... ..	9	...	...	...	5	...
(b) Unsuitable or defective	10	...	...	...	5	...
(c) Not separate for sexes	11	...	...	...	3	...
Other offences against the Act (not including offences relating to Outwork)	12	...	...	...	...	...
TOTAL	60	...	...	...	13	...

Outworkers

Two lists relating to nine outworkers were received during the year relating to the following:—

M/cr. Line

No.

13—Wearing apparel, making, etc.

Rent and Mortgage Interest Restrictions (Amendment) Act, 1933

No applications for certificates as to state of repair were received during the year.

The Rag Flock Acts, 1911 and 1928

No samples of rag flock were sent for examination under these Acts.

These Acts were repealed by The Rag Flock and Other Filling Materials Act, 1951, which received Royal Assent in August and came into operation on the 1st November.

The Rag Flock and Other Filling Materials Act, 1951

The purpose of this Act is to secure the use of clean filling materials in upholstered articles and other articles which are stuffed or lined, and for purposes connected therewith. It provides for the registration of premises where filling materials of the types listed in the Act are used in the manufacture of bedding, toys, baby carriages, or other articles of upholstery, and the licensing of premises where rag flock is (a) manufactured or (b) stored for distribution to registered premises.

The attention of all firms and persons concerned was drawn to the requirements of the Act by public advertisement, and the following particulars refer to premises registered or licensed at the end of the year:—

REGISTERED PREMISES:

(a) for manufacture of bedding	2
(b) for upholstering	1

LICENSED PREMISES:

(a) for manufacture of rag flock	Nil
(b) for storage of rag flock	3

No samples of rag flock or other filling materials were sent for examination under this Act.

The Public Health Act, 1936—Section 154

Legal proceedings were instituted in two cases for offences against this Section of the Act (exchanging toys for rags). The defendants were each fined £2 0s. 0d.

Offensive Trades

Offensive trades carried on in the Borough, numbering twenty in all, are as follows :—

Tripe Boilers	7
Marine Stores	8
Gut Scrapers	2
Hide and Skin Depot	1
Chemical Works	2

During the year, nineteen visits were paid to these premises. No notices were served in respect of defects.

Common Lodging Houses

No new premises were registered during the year. There are four premises registered with accommodation for 68 men. No premises are registered for the accommodation of women.

The Shops Act, 1950—Section 38

One certificate of exemption from the provision of a sanitary convenience was granted in accordance with this Section to the proprietor of a ladies' hairdressing shop. The shop is part of a cinema building and there is suitable and sufficient sanitary accommodation available in this building.

Bakehouses

No new premises were registered during the year and none discontinued. There were 283 bakehouses on the register at the end of the year.

One basement bakehouse remains in use, the Council having renewed on the 1st October, 1949, the certificate permitting its use for a further period of five years.

During the year, 347 visits were paid to bakehouses. The majority of these premises are maintained in a reasonably satisfactory condition and a steady improvement is being effected in many of the premises.

Smoke Abatement

During the year, twelve visits were paid to various mills and laundries in the Borough which were emitting excessive quantities of heavy and black smoke and the managers and steam engineers of these firms were interviewed.

Investigation of Atmospheric Pollution

The scheme for the investigation of atmospheric pollution was described in the report for last year. The Manchester and District Regional Smoke Abatement Committee act as Agents for the participating local Authorities, and re-charge the cost of the scheme on the basis of rateable value.

There has been some unavoidable delay in the setting up of the necessary apparatus and it was not possible to obtain regular analyses until June. The analyses obtained are published in the Atmospheric Pollution Bulletin of the Department of Scientific and Industrial Research, and the following figures show the results obtained in Oldham and the neighbouring towns. At present the only estimation made is that of sulphur dioxide.

SULPHUR POLLUTION—LEAD PEROXIDE METHOD

Mgm. Sulphur Trioxide per 100 sq. cms. exposed surface per day

	April 1951	May 1951	June 1951	July 1951	August 1951	Sept. 1951	Oct. 1951	Nov. 1951	Dec. 1951
OLDHAM									
Haven Lane	—	—	1.10	1.18	1.03	1.29	1.54	2.48	2.59
Horsedge Street	—	—	1.53	1.88	1.94	2.43	2.53	3.58	4.43
Westhulme Hospital	—	—	1.34	1.46	1.82	1.85	2.22	2.95	3.56
Westlands	—	—	1.37	1.68	1.64	1.86	2.53	3.62	4.15
Alexandra Park	—	—	1.19	1.39	1.36	1.43	1.59	2.50	3.18
CHADDERTON									
Chadderton Hall	—	—	1.24	—	1.17	1.66	2.01	—	—
Chadderton Grammar School	—	—	1.41	1.51	1.62	1.67	2.60	3.20	3.85
GROMPTON									
Croftbank, Shaw	—	—	0.85	0.80	0.91	1.20	1.59	2.00	2.76
Home Farm, Shaw	—	—	1.49	1.57	1.43	2.01	2.06	2.60	3.43
FAILSWORTH									
Highways Depot	—	—	1.22	1.37	1.25	1.32	1.91	2.31	2.59
HYDE									
Corporation Yard	—	—	—	—	—	—	—	1.94	1.90
Reservoir	—	—	—	—	0.83	1.13	1.28	1.96	1.90
LEES									
Cemetery	—	—	0.70	0.84	0.81	0.95	1.24	1.75	1.80
MIDDLETON									
Town Hall	—	—	—	0.81	0.86	1.14	1.43	2.05	2.21
Thornham School	—	—	—	1.21	1.45	1.61	2.13	2.65	2.58
ROYTON									
Hanging Chadder Farm	—	—	1.31	1.04	1.60	1.26	2.48	2.66	3.60
Royton Park	—	—	1.08	1.14	1.25	1.59	1.93	2.60	3.42
STALYBRIDGE									
Market Ground	—	—	—	—	1.14	1.45	1.87	2.29	2.63
Oakfield	—	—	—	—	1.12	1.39	1.42	2.12	2.48
ASHTON									
Grasmere, Stockport Road	1.65	3.31	3.57	—	—	—	—	—	1.34
Hartshead Pike	1.09	1.71	1.38	—	—	—	—	—	1.36
Lord Street	0.98	3.75	3.81	—	—	—	—	—	1.73
Lyndhurst Avenue	0.68	2.70	3.67	—	—	—	—	—	1.72
ROCHDALE									
Foxholes House	1.03	0.95	0.89	0.89	0.93	—	1.54	1.60	2.12
Roch Mills	1.13	0.98	0.96	0.86	0.87	—	1.28	1.63	1.75
Rochdale and Manor Brewery	1.36	0.78	0.94	1.15	1.12	—	1.31	1.74	—
Entwistle Road	—	—	—	—	—	—	—	—	2.56
SADDLEWORTH									
Greenfield Sewage Works	1.00	0.87	0.84	1.04	1.08	1.23	1.40	1.70	1.99
MANCHESTER									
Monsall	3.03	2.17	1.97	2.37	2.48	2.96	—	4.45	5.28
Rusholme	2.09	2.16	1.19	1.22	1.16	1.21	2.40	2.55	3.13
Withington	1.27	1.33	0.67	0.59	0.59	0.75	1.61	1.67	1.68
SALFORD									
Ladywell Sanatorium	2.58	1.87	1.88	1.67	2.21	2.27	2.79	2.53	2.67
Regent Road	4.56	3.32	3.19	3.29	3.21	3.30	2.46	4.43	4.10
STOCKPORT									
Cheadle Heath Sewage Works	1.60	1.58	1.11	0.87	0.93	1.21	2.08	2.02	1.54
Portwood	2.06	1.77	1.29	1.44	1.21	1.58	2.13	2.35	2.57
LOGGERHEADS (Staffs)									
Cheshire Joint San.	0.48	0.80	0.37	0.24	0.07	0.44	1.06	0.45	0.60

NOTE.—The apparatus at Loggerheads has for many years indicated the consistently lowest figures in the country.

Rodent Control

The arrangements for rodent control continued as in the previous year. The consolidated grant of 50 per cent of the approved net expenditure incurred by the local authority was continued under Circular N.S.21.

The Borough continued in membership with the Workable Area Committee No. 21 on Rodent Control. In May, Councillor Buckley and the Chief Sanitary Inspector were appointed as representatives of the Health Committee to serve on the Committee for the ensuing year. In June, Councillor Rothwell was appointed in place of Councillor Buckley, who was emigrating to Australia.

The Chief Sanitary Inspector represents the Workable Area Committee No. 21 on the Regional Consultative Committee which co-ordinates the work of the Area Committees in the North West Region.

Sewer Maintenance Treatments

The second sewer maintenance treatment for the financial year 1950-51 and the first sewer maintenance treatment for the year 1951-52 were carried out during the year, when the following results were obtained:—

	1950-51	1951-52
Number of manholes	2085	2085
Number of manholes baited	2071	2082
Number of manholes showing pre-bait take	997	1077
Number of manholes showing complete pre-bait take ...	730	675
Number of manholes showing poison take	—	—
Estimated kill	—	—

Baiting was carried out on two consecutive days and on the third day a poisoned bait was put down. The bait bases were sausage rusk and bread mash and the poisons zinc phosphide and arsenious oxide.

Prevention of Damage by Pests Act, 1949

During the year, 623 complaints of rat infestation were received and the results of investigations made were as follows:—

Defective drainage	313
Stray rats	46
Mice	264

The Pet Animals Act, 1951

This Act, which received the Royal Assent in June, regulates the sale of pet animals and all the powers and duties of the Council under the Act have been delegated to the Health Committee.

Diseases of Animals Acts

The Chief Sanitary Inspector is the Authorised Inspector under the Diseases of Animals Acts.

On two occasions during the year Oldham was included in a controlled area on account of foot and mouth disease which had been confirmed in nearby areas, and movement of cattle was restricted accordingly. During these periods 22 licences were issued for the movement of cattle.

There were four cases of suspected swine fever notified to the Ministry of Agriculture and Fisheries, but in no case was this confirmed, the restrictions being subsequently withdrawn.

In all 33 visits were made under these Acts.

Fertilisers and Feeding Stuffs Act, 1926

There were four samples of fertilisers and twelve samples of feeding stuffs sent for examination under the provisions of the above Act.

The following samples were reported upon as "not in accordance with the statutory statement":—

(i) FERTILISERS :

General Purpose Fertiliser—3.64 per cent soluble phosphoric acid and 6.64 per cent insoluble phosphoric acid, as against 3.0 per cent and 5.0 per cent respectively in statutory statement.

Chrysanthemum Fertiliser—2.55 per cent nitrogen as against 4.14 per cent in statutory statement.

Both these samples were purchased informally from the same firm. This firm was informed, and it was then found that the manufacturers, whose premises were situated outside the Borough, had called in all the unsold packets of these fertilisers. The authority concerned was advised so that any further action, if considered necessary, could be taken.

(ii) FEEDING STUFFS :

Layers Mash—3.18 per cent of oil as against 4.0 per cent in statutory statement.

Layers Mash—3.9 per cent of oil as against 4.5 per cent in statutory statement.

Both these samples were purchased from the same firm, the first informally and the second formally as a follow-up sample. The manufacturer concerned was informed, and gave an assurance that every possible precaution was taken to ensure satisfactory analyses, but the difficulty was that the predominating ingredients were supplied from various sources and with fluctuating analyses. In view of this no further action was taken.

SECTION VII

HOUSING

Pre-War Slum Clearance

At the end of the year two families (four persons) affected by pre-war slum clearance schemes were still awaiting re-housing.

There were six houses in clearance areas and three individual unfit houses still awaiting demolition at the end of the year.

Other Demolitions

Information was received with regard to the demolition of twelve houses by voluntary action. An undertaking under Section 11 (3) of the Housing Act had been accepted in respect of six of these houses. The remaining six houses were in the area of the boundary extension and demolition was necessary for the full development of the new housing estates.

Individual Unfit Houses

It was found necessary to represent eleven houses. Demolition orders were made in respect of eight of these houses involving the displacement of seven families (23 persons). In the remaining cases details of ownership were not completed and it was, therefore, not possible to arrange for the Committee to consider the making of demolition orders before the end of the year.

The following is a summary of the individual unfit houses dealt with during the years 1943 to 1951 :—

Year	Houses represented	No. of families	No. of persons	Houses Vacat'd	Position as at 31st Dec., 1951				
					Persons Rehoused		Total No. of persons awaiting re-hous'g	Houses Demolished	Total No. of Houses awaiting demolition
					By Corporation	By Own arrangements			
1943 to 1945	43	32	131	43	118	13	...	43	...
1946	37	47	128	36	106	18	4	32	5
1947	48	46	109	46	92	14	3	46	2
1948	*40	41	153	40	135	18	...	39	...
1949	14	15	51	14	47	4	...	14	...
1950	†14	13	36	12	24	9	3	4	4
1951	11	15	48	2	8	...	40	...	11

* An undertaking under Section 11 (3) of the Housing Act, 1936, was accepted in respect of one house.

† An undertaking under Section 11 (3) of the Housing Act, 1936, was accepted in respect of six houses. These houses were voluntarily demolished during 1951.

Overcrowding

During the year, eight new cases of overcrowding were discovered. In four of these cases it was found to be deliberate.

Housing Act, 1949

Under this Act exchequer assistance can be given to local authorities or private persons to carry out improvements to houses. It is a condition of all proposals for improvements, that:—

- (i) The dwelling must provide satisfactory housing accommodation for a period of not less than thirty years, and
- (ii) The dwelling must conform with the specified requirements with respect to their construction and physical condition and the provision of services and amenities.

Two applications for improvement grants were submitted to the Housing Sub-Committee, but none was allowed. In the first case the work had been completed before the application was made and, therefore, no action could be taken, and in the second case the amount involved was over the limit of £600 and included conversion of barn and cottage.

Eradication of Bed Bugs

The following figures show the number of houses inspected and the number disinfested:—

	Corporation	Others
Houses inspected	342	251
Found infested	6	39
Disinfested by H.C.N.	1	1
Disinfested by spraying with liquid insecticide	1	112

Removals and Disinfestation of Furniture

The Bedford 30cwt. disinfecting van continues to be used for the disinfestation of furniture of families who are moving into Corporation houses. The use of this vehicle results in the speedy re-letting of houses and the consequent reduction in rent loss.

During the year the furniture of 108 families was disinfested prior to removal to Corporation houses.

Disinfection

The arrangements for disinfection continued as in previous years. During the year, 36,530 articles were disinfected and 3,182 destroyed. The total number of houses disinfected was 812 and 4,076 rooms.

SECTION VIII

INSPECTION AND SUPERVISION OF FOODS

MILK SUPPLY

Food and Drugs Authorities are responsible for the licensing and supervision of pasteurising and sterilising establishments and local authorities for the registration, supervision and licensing of persons and premises dealing in the sale as distinct from the production of milk.

The special designations which may now be used in relation to milk are:—

“Tuberculin Tested.”	“Pasteurised.”
“Accredited.”	“Sterilised.”

The designation “Accredited” will not be permitted after the 30th September, 1954. From this date the only special designation for raw milk will be “Tuberculin Tested.”

The Milk and Dairies Regulations, 1949

At the beginning of the year there were eighteen distributors producing milk in the Borough. One new distributor producer was registered, and two ceased production. The extension of the Borough boundary brought six additional distributor producers within the Borough.

There were 74 distributor producers outside the Borough at the beginning of the year, but on the 1st April six of these came within the Borough under the Borough Extension Act. Another took over land and premises in the Borough, and ten ceased to retail milk in Oldham.

During the year, 24 new distributors were registered for the sale of bottled milk.

On the 31st December, there were seven premises registered as dairies and 611 registered distributors of milk comprised as follows:—

Number of distributors producing milk in the Borough	23
Number of distributors producing milk outside the Borough	57
Number of distributors with dairy premises in the Borough	7
Number of distributors with dairy premises outside the Borough	7
Number of other distributors	5
Number of shops at which bottled milk only is sold	512

The Milk (Special Designation) (Raw Milk) Regulations, 1949

The following licences were in force on the 31st December:—

(a) To use the designation “Tuberculin Tested”:—

*Producer's Licence	2
Dealer's Licence	55
‡Supplementary Licence	2

(b) To use the designation “Accredited”:—

*Producer's Licence	5
Dealer's Licence	—
‡Supplementary Licence	6

**The Milk (Special Designation) (Pasteurised and Sterilised Milk)
Regulations, 1949**

The following licences were in force on the 31st December:—

(a) To use the designation “ Pasteurised ” :—

Dealer's (Pasteuriser's) Licence	1
Dealer's Licence	122
‡Supplementary Licence	4

(b) To use the designation “ Sterilised ” :—

Dealer's (Steriliser's) Licence	—
Dealer's Licence	570
‡Supplementary Licence	1

* These licences are granted by the Ministry of Agriculture and Fisheries.

‡ A Supplementary Licence is issued to persons whose premises are outside the Borough but who distribute milk within the Borough.

Examination of Milk (Samples) for Tubercle Bacilli

During the year, 247 samples were taken for examination for the presence of Tubercle Bacilli. Unfortunately, three samples (two ungraded and one accredited) had to be disregarded as the guinea pigs injected with these samples died from another infection. Of the 244 samples reported upon, 96 were from farms within the Borough, three (3.12 per cent) of which were “ positive ” and 148 were from milk produced outside the Borough, fourteen (9.46 per cent) being “ positive.”

On receipt of a “ positive ” report the name and address of the milk producer is immediately notified to the appropriate Divisional Veterinary Inspector of the Ministry of Agriculture and Fisheries and to the Medical Officer of Health of the district concerned if the milk was produced outside the Borough.

Following investigations by the Veterinary Surgeon, seven cows were removed and slaughtered under the Tuberculosis Order. In addition, five cows, which had been removed from the various herds since the samples were taken and prior to the Veterinary Surgeons' investigation, were traced and found to have been condemned for tuberculosis.

The following table details the 244 samples reported upon:—

Class of Milk Sample	No. of Samples Taken	Tubercle Bacilli	
		Absent	Present
Ungraded	193	179	14
Tuberculin Tested	14	14	—
Accredited	37	34	3
Totals	244	227	17

Information was also received from the Medical Officer of Health, Chadderton, with regard to three "positive" milk samples taken from milk producers in that area. These producers were all delivering milk within the County Borough. In each case, following investigations by the Veterinary Surgeon, a cow was removed and slaughtered under the Tuberculosis Order.

In the following nine cases notice was served under Regulation 20 of the Milk and Dairies Regulations, 1949, making the sale of milk used for human consumption or in the manufacture of products for human consumption conditional upon it being subjected to satisfactory heat treatment. In only one of these cases was the milk from an Oldham farm (Sample No. T/110). In the other cases the milk was from farms outside the Borough and the notice was served by the Medical Officer of Health of the authority concerned:—

Sample No.

- T/110 The notice was served on the 28th August and withdrawn on the 30th October. The farmer subsequently submitted a claim to the Department for £23 10s. 3d. and payment of this amount was agreed by the Ministry of Health.
- T/29 This milk was from a farm in Rochdale. The notice was served on the 28th May and withdrawn on the 26th July.
- T/45 This milk was from a farm in Crompton. The notice was served on the 19th June and withdrawn on the 20th July.
- T/56 This milk was from a farm in Royton. The notice was served on the 21st June and withdrawn on the 11th August.
- T/118 This milk was from a farm in Saddleworth. The notice was served on the 13th September and withdrawn on the 29th October.
- T/153 This milk was from a farm in Saddleworth. The notice was served on the 25th October and was not withdrawn till 28th February, 1952.
- T/167 This milk was from a farm in Limehurst. The notice was served on the 17th November and was not withdrawn till 3rd January, 1952.
- T/170 This milk was from a farm in Crompton. The notice was served on the 14th November and was not withdrawn till 11th March, 1952.
- T/175 This milk was from a farm in Crompton. The notice was served on the 21st November and was not withdrawn till 18th February, 1952.

There were 24 samples of milk taken to ascertain whether the milk was "sufficiently heat treated" and in five cases the sample failed to pass the phosphatase test.

Four of the unsatisfactory samples were taken from a producer outside the Borough and on investigation it was found that the wholesale dealer had made a mistake and supplied this producer with some raw milk, which was milk surplus from another producer. Full details with regard to these samples were forwarded to the Medical Officer of Health of the area concerned, but in view of the circumstances no further action was taken.

The remaining unsatisfactory sample was also from a producer outside the Borough and in this case he stated that a mistake had been made and that the milk must have been raw milk which was obtained from another producer. This was investigated and it was found that two other producers were under direction by the Ministry of Food to supply their surplus milk to this producer. In view of this information no further action was taken.

Milk Samples Taken for Methylene Blue Test

There were 123 samples taken, with the following results:—

Class of Milk Sample	No. of Samples Taken	Methylene Blue Test	
		Passed	Failed
Pasteurised	113	113	—
T.T/Pasteurised	4	4	—
Heat Treated	—	—	—
Tuberculin Tested	3	3	—
Accredited	3	3	—
Ungraded	—	—	—
Totals	123	123	—

Milk Samples Taken for Phosphatase Test

Regular samples are taken of pasteurised milk which comes into the Borough and of milk which is pasteurised in the Borough. Samples of the milk supplied under the Milk in Schools Scheme are taken monthly.

The following table details the samples taken:—

Class of Milk Sample	No. of Samples Taken	Phosphatase Test	
		Passed	Failed
Pasteurised	153	153	—
T.T/Pasteurised	6	6	—
Heat Treated	24	19	5
Totals	183	178	5

Samples which fail to pass the tests are followed up immediately and where this involves plants outside the Borough the Medical Officer of Health and the firm concerned are notified.

The five samples of heat treated milk which failed to pass the phosphatase test were from producers upon whom a notice had been served in accordance with Regulation 20 of the Milk and Dairies Regulations, 1949, and are referred to above.

Milk Samples for Turbidity Test

There were seven samples of sterilised milk taken. All were reported as satisfying the test.

Milk Production in the Borough

During the year six out-district farms were taken over under the Borough Extension Act, 1950; one new farm was registered by the Ministry of Agriculture and Fisheries, and two farms ceased milk production.

At the end of the year 28 farms with 402 cows were producing milk in the Borough. There were five farms with "Accredited" licences and two farms with "Tuberculin Tested" licences.

ICE CREAM

During the year the control over the manufacture and sale of ice cream was maintained and 125 visits were paid to registered premises.

On the 31st December there were 260 premises registered under Section 14 of the Food and Drugs Act, 1938, for the sale, manufacture or storage of ice cream. The following table gives details of the premises registered:

(a) For the manufacture and sale of ice cream	10
(b) For sale of pre-packed ice cream	243
(c) For sale of loose and pre-packed ice cream	7

In the previous year 201 premises were registered for the sale of pre-packed ice cream and four for the sale of loose and pre-packed ice cream.

Ice Cream (Heat Treatment, &c.) Regulations, 1947-1951

There are seven large ice cream manufacturers in the Borough and three firms who use a "complete cold mix." All the firms have complied with the requirements of the Regulations and are fully alive to the importance of producing a product which is prepared and stored under strict hygienic conditions.

Bacteriological Examination

There is no statutory bacteriological standard of cleanliness for ice cream, but a form of methylene blue test has been adapted for ice cream and the result is classified in one of four grades. Ice cream which consistently fails to reach Grades I or II is to be regarded as indicating defects of manufacture or of handling, which call for further investigation.

There were 41 samples of ice cream submitted for the methylene blue grading test, with the following results:—

Grade I	31
Grade II	8
Grade III	1
Grade IV	1

In the case of the Grade III and Grade IV samples, the attention of the manufacturers was drawn to the results of the test and subsequent samples from these firms were reported satisfactory.

Standard for Ice Cream

On the 1st March, the Food Standard (Ice Cream) Order, 1951, set up the following minimum standards for ice cream :—

Fat	5 %
Sugar	10 %
Milk solids other than fat	7½ %

During the year, 33 samples of ice cream were taken for analysis and only one failed to comply with the standard, being reported deficient of fat to the extent of 20 per cent. The attention of the manufacturer was drawn to this deficiency and subsequent samples have been satisfactory.

Meat Inspection

One slaughterhouse was in use at the beginning of the year. The alterations to the permanent Ministry of Food slaughterhouse were completed early in the year, when both slaughterhouses were used for the remainder of the year.

Number of animals killed and inspected during the year, together with the amount of meat condemned, was :—

	Beasts & Cows		Sheep	Pigs	Calves	Total
No. killed ...	5,867	3,893	24,346	1,070	2,977	38,153
Weight ...	5,557,818 lbs.		1,255,718 lbs.	165,212 lbs.	139,656 lbs.	118,404 lbs.
Weight condemned ...	199,409 lbs.		1,846 lbs.	4,872 lbs.	1,336 lbs.	207,463 lbs.
Percentage condemned ...	3.588 %		0.147 %	2.949 %	0.957 %	2.914 %

Carcases Inspected and Condemned

	Cattle exclud- ing Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed (if known) ...	5,867	3,893	2,977	24,346	1,070
Number inspected ...	5,867	3,893	2,977	24,346	1,070
All Diseases except Tuberculosis— Whole Carcases condemned	...	16	28	16	14
Carcases of which some part or organ was condemned	1,051	1,840	4	463	73
Percentage of the number inspected affected with disease other than Tuberculosis ...	17.914	47.675	1.075	1.96	8.121
Tuberculosis only— Whole Carcases condemned	12	93	5	...	4
Carcases of which some part or organ was condemned	716	1,546	...	...	31
Percentage of the number inspected affected with Tuberculosis ...	12.412	42.101	0.168	...	3.271

Congenital tuberculosis was found in three calves and reports were forwarded to the appropriate Divisional Veterinary Inspector of the Ministry of Agriculture and Fisheries. As a result, two dams of the calves were slaughtered under the Tuberculosis Order, 1938, and in the remaining case the dam of the calf could not be traced.

The following figures show the percentage of cows affected with tuberculosis for the years 1948-1951:—

	Cow Carcases Examined	Percentage affected with Tuberculosis
1948	2771	44.02
1949	3160	49.62
1950	4206	43.62
1951	3893	42.10

The total weight of meat and offal destroyed was:—

For Tuberculosis 130,209lbs.

For diseases other than Tuberculosis 77,254lbs.

During the year sixteen cows were found to be affected with tuberculosis of the udder. In nine cases there was wide infection of the organs and lymphatic glands necessitating condemnation of the whole carcase and offal. In the remaining seven cases partial condemnation was necessary.

The condition of these cows gives cause for grave concern in that all of them must have been milk producers just prior to slaughter, and these findings emphasise the necessity for frequent veterinary inspection on the farms, and regular milk sampling for tubercle bacilli.

Cysticercus Bovis

Examination for the cysticercus bovis parasite has continued in accordance with Ministry of Food Circular MF5/48, and 45 beasts and cows were found to be affected as follows:—

Portion of Carcase and/or Organ Affected.	Beasts & Cows
Head, Heart and Skirt	1
Head and Heart	9
Head only	24
Heart only	11

No generalised cases were found and all the carcasses were sent to cold storage for treatment, being subsequently allocated by the Ministry of Food.

Summary of Diseased and Unsound Food Destroyed During 1951

	lbs.
Cattle (121 whole carcasses)	69,029
Sheep (16 whole carcasses)	742
Pigs (18 whole carcasses)	3,571
Calves (33 whole carcasses)	1,291

Parts of Carcases and Offal	lbs.
(5,724 Cattle, Sheep, Pigs and Calves) ...	132,830
Preserved Foods	15,857
Dates	13,020
Beef	3,173
Tomatoes	738
Chickens	280
Bacon	178
Butter	161
Flour	133
Barley	117
Mussels	112
Lamb	78
Margarine	72
Fish	72
Chocolate and Sweets	53
Cheese	53
Sausage	45
Fruit	40
Dried Fruit	40
Pork Sausage	28
Black Puddings	19
Sago	18
Cake	15
Rice	10
Ham	9
Fish Cake	7
Coconut	5
Poultry	3
Total	241,799lbs.

Slaughter of Animals Act, 1933

There were five renewal licences granted during the year.

Horseflesh

There are two shops in the Borough for the sale of horseflesh. Arrangements for slaughtering and inspection continued as in the previous year.

FOOD AND DRUGS ACT, 1938

Food Hygiene

The Model Bye-laws (Series 1) made under Section 15 of the Food and Drugs Act, 1938, are in force in the Borough. Increased attention was given to the enforcement of these Bye-laws and to the inspection and supervision of food preparation premises. There were 1,213 inspections made of such premises compared with 602 in the previous year, and advice was tendered and every effort made to educate the personnel employed in food handling. The following improvements were effected:—

Structural Defects Remedied	8
Premises separated from Domestic	7

Sanitary Accommodation—

Insufficient accommodation—

accommodation increased	4
Dirty accommodation—cleansed	1
Internal accommodation provided	2
Toilet facilities provided or improved	10
Hot Water provided	12
Sinks provided	6
Ventilation improved	3
Storage accommodation provided	2
Vermin Infestations cleared	2
Ovens converted	1
Premises Cleansed—	
Rooms	17
Mobile Canteen	1

In addition to the above, extensive improvements have been carried out to the kitchen of one restaurant, and to the premises of three wholesale and retail meat manufacturers and pork butchers.

There is close liaison with the local officers of the Ministry of Food, and 27 applications for catering licences were referred for investigation and report, with the following results:—

Premises	Recommended	Not Recommended
General Shops	4	6
Confectioners	4	—
Public Houses	3	2
Fish & Chip Shop	—	1
Refreshment Room	1	—
Snack Bar	1	—
Milk Bar	1	—
Mills	1	1
Public Hall	1	—
Building Site	1	—
	17	10

Contamination of Food

A complaint was received of a loaf of bread containing a wire nail. The loaf was from a local bakery, and the manager was interviewed but could not account for the incident. The complainant was reluctant to give any further evidence, so no proceedings or other action could be taken.

A complaint was received of a cream cake containing a piece of rag-like material. The bakery was visited and a formal warning sent to the firm concerned.

Legal proceedings were instituted against the proprietor of a bakery outside the Borough, who supplied bread to the day nurseries. A loaf of bread was found to contain a dead cockroach. The defendant pleaded guilty to selling bread which was unfit for human consumption. In dismissing the case, the presiding Magistrate said the defendant had had an excellent reputation for 36 years, and added, "Although he pleaded guilty, we consider this more of a misfortune. We grant him an absolute discharge."

Food and Drugs Act, 1938—Section 13

Legal proceedings were instituted against a local firm for unsatisfactory and unhygienic conditions found in their cooked meat factory, but before the case was heard the firm concerned had completed improvements to the premises. The Magistrates, in dismissing the charges, said they were satisfied that it was the wish of the firm to carry out a comprehensive scheme, and that the firm had not been unreasonable in this connection.

PUBLIC HOUSE SURVEY

The survey of the public houses in the Borough, which was commenced in the previous year, was completed and involved 313 visits to 263 premises. The survey was undertaken with special reference to the cleansing and sterilising of glasses, but enquiries were also made with regard to filters, beer engines and pipes, storage of beer and disposal of slop beer, sanitary accommodation and catering facilities.

The survey was largely undertaken by Mr. S. V. Robinson, Assistant Sanitary Inspector, and he is to be commended for his thorough and interesting report. The following points are of special interest:—

Water Supply and Washing-up Facilities

With the exception of one public house, where hot water has to be carried from the kitchen at the rear, a distance of ten yards, all the premises were provided with adequate means of procuring hot water, by either domestic boilers or by the installation of electric or gas geysers. In 38 premises the domestic system was supplemented by the installation of gas geysers or immersion heaters, thus ensuring a constant supply of hot water at all times. In only one case was cold water not piped to the sink in the bar.

Sinks were either of stainless-steel, solid-pressed unit type, or of copper in which a flange of the block tin draining board was turned into the well. Many of the sink waste pipes were untrapped and of considerable length, and discharged over trapped gulleys in the cellars.

Cleansing and Sterilising of Glasses

During the evening visits it was observed that more attention could be paid to the washing of glasses than is at present carried out, the present method consisting in many cases of merely dipping the glasses into water and inverting them on the draining board, after which they were polished with a glass-cloth. In one case, it was seen that parts of the upper rim of the glasses never came into contact with the water due to the fact that the person employed in the operation was wearing a wristlet watch and heavy bangles on her wrists.

Disinfection of glasses may be obtained by the use of Quaternary Ammonium Compounds or other sterilising agents applied to the washing-up water during the evening, and this was practised in 161 public houses. The solution was applied to the sink either by hand measure or by means of a "tip-up" dispenser, but in neither case could any accurate quantity be supplied. Several licensees were under the impression that

sterilisation of the glasses could be obtained by the use of ordinary detergent solutions of chemical soaps. Others applied a proper sterilising solution to the sink when glasses were being given a final wash at the close of the day's trade or at even longer intervals, but in neither case could satisfactory sterilisation be obtained when it was most required, i.e., during the serving of beer, particularly when the trade is heavy.

The methods of cleansing glasses usually involve a final polishing with a glass-cloth which, if the cloth is not perfectly clean, offer a possible source of re-contamination of the glasses.

Several licensees complained of the difficulty of removing lipstick deposits from the upper rims of glasses which cannot be easily removed in the normal washing-up processes. It was suggested that such stained glasses should be put aside until proper attention could be given to them.

During evening observations, it was seen that bar counters were swabbed down with cloths subsequently rinsed in the washing-up sink. Frequently this process was followed by the washing of glasses without change of water, which in some cases was not changed in a period of 25-30 minutes.

Disposal of Slop Beer

In order to produce the required "head" on the beer when filling glasses, a certain amount of overspill beer accrues, either in drip cans situated beneath the taps or in an open bucket in the cellar, fed by a return pipe from a drip sink beneath the pump. In the former case, the beer is used as it accumulates by part-filling the glasses and topping them up with fresh beer from the pumps or is returned to the cellar in buckets, filtered and returned to the casks. During the process of filling glasses, the overspill beer may be contaminated by its passage over the hands of the bar attendant. A practice which is often carried out and which merits condemnation is that of re-filling used glasses without washing them when a repeat order is given by a customer. In filling such glasses the overspill beer may be contaminated by the beer washing down the outside of the glass. This is often done at the request of the customer. Several licensees stated that they always refused to re-fill such glasses and this should be an accepted practice.

At one public house the waste beer from the drip-sink was returned direct to the beer-engine through a short length of plastic pipe and a small wire sieve.

Drainings from customers' glasses and from trays were usually disposed of by pouring them to waste but in three cases it was seen that such waste beer was used up in the manner described above. There was no evidence to suggest that such a practice was adopted throughout the trade, but in a further two cases it was seen that such waste beer was collected in a separate container at the side of the bar.

Drainings from the barrels or "bottoms" and usable beer accumulating in open buckets placed under the barrel taps to receive any leakage from the connection, were treated by passing them through a filter and returning the filtrate to other barrels.

Filters

The principal type of filter in use is one of fine wire gauze three inches in diameter, which is placed inside a tun-dish of copper, enamel or tinned iron, the latter being the least hygienic owing to the development of rust at the seams which prevents proper cleansing. Various types of filters are in use either separately or in conjunction with the wire sieve. These consist of felt hats, sponges, glass-cloths and other fabrics or filter papers. Felt hat filters (a term used in the trade) which are suspended from the ceiling or a special framework in the cellar along with sponges offer the greatest difficulty for their proper cleansing and were said to be either boiled or soaked for a period of time in hot soda water. Filter papers appear to be the most hygienic type of filter due to the fact that they can only be once used and then must be destroyed. Several filters and tun-dishes were in a dirty condition and in such cases attention was drawn to these conditions.

Beer-Engines and Pipes

Beer-engines are usually of two types :—

- (1) All metal construction.
- (2) Leather bucket type.

The former type is the most hygienic. The interiors of the pumps are inaccessible and in many cases have to be dismantled for examination by experienced bar-fitters at periods ranging from two to twelve months. A number of landlords are competent to perform this operation and do so. A number of older type pumps have lead connections approximately one foot length between the pump cylinders and the taps.

Various materials are used for beer pipes either separately or a combination of two or more materials joined by clamps or screwed joints. Lead pipes were in use in thirteen premises and may give rise to metallic contamination of the beer. Most premises were equipped with metal pipes either of the telescopic or sectional types or of straight lengths joined with rubber connections which may all be dismantled and easily cleaned. Plastic pipes are now coming into general use and in 64 premises were installed alone or in combination with other materials. The advantages of plastic pipes are that the number of joints are reduced; that they are flexible and that the interior of the pipe is clearly visible for examination. Glass also has this latter advantage, but they are constructed of short, six-inch to nine-inch length of glass connected by rubber joints, there being perhaps twenty to thirty such joints on each length of pipe.

In two premises, electric centrifugal pumps were used for lifting beer from the cellars to discharge through taps operated by a lever in the bar.

Cleansing of beer-engines and pipes is carried out by soaking the pipes in hot soda solution or some proprietary pipe-cleaning preparation, after which they are rinsed out by a solution of salt water or fresh water. This is usually carried out weekly. Two premises have special apparatus for the cleansing of pipes which is attached to the water main.

Storage of Beer

The usual storage of beer was in the cellar. In three cases, however, the cellar was at the rear of the premises, the configuration of the land bringing these stores partly below ground level.

In a number of cellars accumulations of rubbish were found, but when attention was drawn to these they were removed. A few cellars were used for the storage of coal where no other provision was made, and to avoid having to go outside in inclement weather.

Ill-fitting gantry doors and ventilating windows to cellars were sources of complaint in some instances, allowing dust and surface water to enter from the street.

The majority of licensees were proud of the condition of their cellars and in some cases the floors were stoned or painted around the stillages.

A few complaints were made of the infestation by mice or cockroaches and advice was given. None of these infestations was serious or extensive. Two complaints of rats were made and these have been dealt with by the Department.

Sanitary Accommodation

Water Closets.—These were maintained in a clean condition and good working order.

Waste-Water Closets.—These were provided at 29 premises and were maintained in a clean condition.

Pail Closets.—Only three premises have pail closets for the use of the public. In two of these premises, schemes for their conversion have been approved and are now awaiting commencement. In the remaining case, owing to the isolation of the premises, no sewer is available and the use of pail closets must be continued.

In some cases sanitary accommodation was not readily accessible or was approached through the private living quarters of the landlord.

Public Rooms

These were usually maintained in a scrupulously clean condition.

Spitoons were provided in 53 premises and it is suggested that the use of these should be discontinued.

Catering

Full meals were provided at eleven public houses either for residents or restaurants within the premises, and were prepared in separate kitchens or in the private quarters according to the extent of the trade. A number of premises were supplying sandwiches prepared in the living quarters or supplying pies or sandwiches purchased from other caterers. In the majority of premises adequate precautions appeared to be taken to prevent contamination of the food and in many cases covers were provided for food for sale on the bar counters.

General Remarks

The public houses in the Borough are controlled by 22 Brewery Companies, and the good condition of most of the premises visited is due to their supervision, as inspectors are specially employed by the Breweries for the purpose.

Two breweries appear to effect little supervision, as a large number of the premises under their jurisdiction fall below the general standard.

There are seven public houses "Free from Brewer" situated within the Borough.

In all inspections the licensees have been co-operative and there was no case of obstruction during the course of the survey.

Report of the Public Analyst

Mr. S. Ernest Melling, M.Sc., F.R.I.C., Borough Analyst, has kindly furnished the following report:—

"I have the honour to report that, during the year ended 31st December, 1951, 403 samples of food and drugs were submitted for analysis under the provision of the above Act.

The samples comprised 305 milks, 33 ice creams, a sample each of Chef de Set and Pygelline, six edible gelatines, 13 groceries, 11 household medicaments, drugs, etc., two samples of aniseed balls, one of bread, and thirty miscellaneous food adjuncts (condiments, etc.).

Only seven samples were reported against, or 1.7 per cent of the total submitted. Of these, five were milks, representing 1.6 per cent of those analysed. These percentages are extremely low and are a great improvement on 1950 (4.9 per cent and 5.7 per cent, respectively).

According to the Sale of Milk Regulations, 1939, genuine milk contains, until the contrary is proved, a minimum of 3.0 per cent of milk-fat and 8.5 per cent of non-fatty solids. Two of the five samples reported against contained slightly less than 8.5 per cent of non-fatty solids, but the result of the Freezing Point (Hortvet) test showed that the deficiencies were natural and not due to the addition of water. Of course, it is possible and not at all unusual for milk to contain **upwards** of 8.5 per cent of non-fatty solids and still be adulterated with water, and this fact alone gives emphasis to the supreme importance and value of cryoscopic (F.P.) test. One such case was noted during the period under review where the Freezing Point was -0.518°C . with fat and non-fatty solids of 3.33 per cent and 8.52 per cent, respectively. Two samples taken the following day in course of delivery gave corresponding figures of -0.538°C . and -0.546°C . with 3.60 per cent and 3.61 per cent of fat and 8.54 per cent and 8.63 per cent of non-fatty solids, respectively. Although some 3.8 per cent of extraneous water was indicated it was deemed expedient in absence of a direct Appeal to the Cows to certify the sample as genuine on the footing of the Sale of Milk Regulations.

The remaining three samples of milk were of impoverished quality in respect of cream content. In one case a fat deficiency of 20 per cent was based on the percentage of fat (2.85) of a sample taken on Appeal and therefore naturally deficient to the extent of 5 per cent. The third sample, moreover, contained only five-sixths of the prescribed minimum content of fat.

Apart from the foregoing samples it will be found on averaging the analytical data set out in each certificate that the milk supply in Oldham has a compositional value sensibly superior to that officially required, nor does it suffer in comparison with the quality vended in similar industrial communities. There is further the satisfactory feature of a complete absence of manipulation by way of artificial colouring to enhance appearance or the addition of preservative agents.

On the 1st March, 1951, a Ministry of Food Order came into force setting up the following standard for ice cream: fat, 5 per cent; sugar, 10 per cent; milk-solids other than fat, 7.5 per cent. Only one sample taken in Oldham after this date failed to comply with the fat requirement in that it contained only 4 per cent and was, therefore, reported as deficient to the extent of 20 per cent.

The remaining sample to which objection was taken was the "Chef de Set" (jelly for meat pies), which contained 200 p.p.m. of zinc. This contamination was considered to be excessive, although there is no official regulations as to the maximum permissible amount of zinc for agar (the jellifying agent) as in the case of gelatine. The Department pursued a vigorous enquiry in this matter with the manufacturers, who admitted the facts and took immediate measures to ensure a closer control of output whereby the metallic contamination of this order can be avoided in the future. It was not suggested incidentally that consumption of meat pies containing their quantum of jelly would be injurious or give rise to any gastric disturbance, but it is necessary to take a stand on the former grounds of achieving a satisfactory refinement in quality which modern commercial production and control of edible foods can ensure."

Results of Action Taken with Regard to Samples not Genuine

Sample No.	Article	Results of Analysis	
11	Milk	Naturally deficient in non-fatty solids to the extent of 2.3%	
12	Milk	Naturally deficient in non-fatty solids to the extent of 3.5%	
97 101 (Appeal to Cow for Sample 97)	Milk Milk	20% fat deficiency Naturally deficient in fat to the extent of 5%	
253	Milk	16.6% fat deficiency	This was bulk milk and it was impossible to identify its origin
A.38	Ice Cream	20% fat deficiency	Letter of warning
A.76	Chef de Set (Jelly for meat pies)	200 p.p.m. of zinc	Letter to manufacturer and Ministry of Food

SECTION IX

MISCELLANEOUS

NATIONAL ASSISTANCE ACT, 1948 (Section 47)

Removal to suitable premises of persons in need of care and attention

The Welfare Services Committee exercise all the powers and duties of the Council under the Act with the exception of the powers and duties under Section 47 which, by agreement, were transferred to the Health Committee, and in January the Council approved the following resolution of the Health Committee:—

“That a Sub-Committee consisting of the Chairman and Deputy Chairman for the time being of this Committee, the Chairmen respectively for the time being of the Ambulance Sub-Committee, the Mental Health Sub-Committee, the Maternity and Child Welfare Sub-Committee, and the Home Nursing Sub-Committee, together with two lady members of the Health Committee (to be appointed for the remainder of the current municipal year and thereafter annually by the Health Committee), be appointed a Special Committee under Section 85 of the Local Government Act, 1933, and that all the powers of the Local Authority under Section 47 of the National Assistance Act, 1948, be delegated to the said Sub-Committee, their proceedings being submitted for the information of the Health Committee and the Council from time to time.”

National Assistance (Amendment) Act, 1951

This Act, which came into force on the 1st September, 1951, amends Section 47 of the National Assistance Act, 1948. It provides an emergency procedure for the removal to suitable premises of persons urgently in need of care and attention. Where the Medical Officer of Health and another registered medical practitioner certify that in the case of a person to whom Section 47 (1) applies, and, in their opinion it is considered necessary that he should be removed without delay from the premises in which he is residing, an application for a Removal Order may be made to the appropriate Court or to a single Justice.

If an Order is made, it may only authorise a person's detention for a period not exceeding three weeks. Any application for an Order extending this period must be made in accordance with the provisions of Section 47. The application may be made either by the Local Authority or by the Medical Officer of Health where the Authority authorises him to make application in cases to which the Act applies, and in September the Health Committee passed a formal resolution authorising the Medical Officer of Health to make application in these cases.

It was only necessary to deal with one case under the Amendment Act. The circumstances of this case, which are given below, occurred on the 31st December and were most unusual.

Case 5/51.—A female, aged fifty years, who lived alone sustained an accident whilst crossing the main road and had been removed to the Oldham Royal Infirmary, where she was diagnosed as having a fractured femur and recommended for in-patient treatment. This she adamantly refused and demanded to be taken home. She was removed by ambulance but on arrival at her home the driver/attendants were unable to take her into the house and the circumstances were at once reported to the Medical Officer of Health when an immediate visit was made to the home. This was found to be in a filthy condition, littered with furniture, junk, coal, and stocks of food. It was almost impossible to enter the house let alone admit a patient by stretcher. It was impossible for her to be cared for at home, nor was there anyone available to care for her. Her practitioner was contacted, and he and the Medical Officer of Health failed to persuade her to return to hospital for treatment. This she stubbornly refused to do, so the necessary certificate was completed for her removal to hospital without delay and an Order for her detention in hospital for a period of three weeks obtained from a magistrate. She was admitted to Oldham Royal Infirmary in the early evening.

The following case illustrates the difficulty of dealing with this type of case prior to the Amendment Act becoming operative on the 1st September, 1951:—

Case No. 1/51.—A male, aged 83 years, who had been under observation for some considerable time. It was found that his condition had deteriorated and his clothing and bedding were scanty. His food was insufficient and the house in which he lived was in an insanitary condition and in a state of disrepair. As he refused to enter Part III Accommodation the necessary certificate was forwarded to the Town Clerk and a request for the Special Sub-Committee of the Welfare Services Committee to be called. Before the necessary formalities could be completed the man collapsed whilst out shopping and agreed to be admitted to Part III Accommodation. His admission was effected without any further delay. He was subsequently transferred to the chronic sick wards of the General Hospital and was still there at the end of the year.

Action under Section 47 was commenced in the following cases but in only one case (Case No. 4/51) was it necessary for Court proceedings to be taken:—

Case No. 2/51.—A female, aged 76 years, living in one room of a house let in lodgings. The room was dirty and she was verminous. She would not agree to voluntary removal and in February the circumstances were reported to the Special Sub-Committee who resolved that application be made to the Court for her removal to Part III Accommodation at the Boundary Park General Hospital Annexe. Before the hearing was fixed she disappeared from her lodgings and was found some weeks later lodging with a female much

younger than herself. Her general condition and cleanliness were much improved and no further action was taken other than supervision.

Case No. 3/51.—A male, aged 77 years, who was suffering from cancer and was referred by his practitioner as being in urgent need of hospital care, which he refused. He was in a filthy and unkempt condition. The case was reported to the Special Sub-Committee in April, who resolved that application should be made to the Court for his removal to hospital. On being formally advised that the case was being heard, he decided to go into hospital voluntarily. He remained in hospital and died six months later.

Case No. 4/51.—A female, aged 72 years, who lived in one room of a two-roomed single type house which was approached by a dark, steep and narrow staircase. The room in which she lived was in a most insanitary condition and was heaped all round to a height of two to three feet with ashes and refuse. She was dirty and ill-kempt and used a mattress on a table for a bed. She would not agree to voluntary removal and, following a report to the Special Sub-Committee, an Order for her removal and detention for three months in Part III Accommodation at the Boundary Park General Hospital Annexe was obtained. On the expiration of the Order she returned to the house which had been cleaned and decorated. At the end of the year she was still at home and her condition had not deteriorated.

Primary action was taken in the following case in 1950:—

Case No. 4/50.—A female, aged 82 years, who was blind and deaf and very dirty in her habits and person and living in a back-to-back house which was verminous. She was removed under a Court Order to Part III Accommodation at the Boundary Park General Hospital Annexe in August, 1950, and in November the Order was renewed for a further three months. In February, 1951, the Special Sub-Committee again recommended that an application be made to the Court for her further detention, but she died a few days before the application was to be heard.

Hostels for Aged Persons

The Director of Welfare Services (Mr. H. Wrigley) has kindly supplied the following information:—

“The following accommodation was available in Residential Homes for Aged Persons during the year:—

Greenacres Lodge, Greenacres Road, Oldham.
Residential Home for 36 women.

“Westlands,” Grange Avenue, Oldham.
Residential Home for 31 men.

“The Hollies,” Frederick Street, Oldham.
Residential Home for 30 men.

Stamford House, Lees New Road, Lees.
Residential Home for 15 women.”

Manchester and Salford Family Service Unit

The Family Service Unit continued to operate within the Borough under the agreement made in 1949 for an experimental period of two years, commencing in December, 1949.

The agreement allowed for the equivalent of one case worker to be allocated to the Oldham area and for the Corporation to make an annual grant of £500 to the Unit, this payment being equally divided (£125 each) between the Health, Housing, Children's and Welfare Services Committees. The Housing Manager acts as Liaison Officer and any cases which are thought to be suitable for supervision by the Unit are referred to him by the Head of the Department concerned.

At the end of the year the Committees agreed to extending the existing agreement for a further five years from the 1st December, 1951, subject to the approval of the appropriate Ministries and the contribution was increased to £750 per annum on the following basis:—

Housing Sub-Committee	£125 per annum
Welfare Services Committee	£125 per annum
Children's Committee	£250 per annum
Health Committee	£250 per annum

The following report on the work of the Unit in Oldham during the year has been made by the Deputy Fieldwork Organiser, Mr. D. Okell:—

“The Family Service Unit, which commenced working in the Borough a few years ago, continued to assist certain families during the year. Progress reports have been reviewed periodically. This work is of a very intensive nature and it has, therefore, been necessary to concentrate on families who seemed to be most in need of support and close supervision. Several families have been referred with specific problems and help has been given either in dealing with the problems directly or in referring clients to the appropriate authority. Comprehensive work has been carried out on more than twenty families during the year; four new cases have been opened and one closed where the family had become self directing and satisfactory standards had been achieved. Well over one thousand visits have been made to homes and nearly a thousand contacts on behalf of families. Manual work of various kinds has been undertaken in the homes in co-operation with the families. One field of their activities has not been fully developed here and that is welfare work with children. They are now hoping to stimulate local interest in this respect and are trying to provide more outings and parties in the future. They wish to place on record the splendid co-operation they have enjoyed in dealing with all departments of the Corporation.”

SUPERANNUATION—MEDICAL EXAMINATIONS

Corporation Employees

During the year the medical staff of the Department undertook medical examinations for the various Corporation Departments as follows:—

Department	Entrants	Disability Pensions	Total
Markets and Baths	3	—	3
Surveyors and Buildings	19	1	20
Borough Treasurer's	5	—	5
Children's	22	1	23
Cleansing and Transport	15	1	16
Education	36	4	40
Fire Service	1	—	1
Housing	6	—	6
Libraries	6	—	6
Public Health	87	—	87
Parks and Cemeteries	5	2	7
Passenger Transport	231	6	237
Police	7	—	7
Local Registrar's	1	—	1
Street Lighting	4	1	5
Town Clerk's	5	—	5
Town Hall	1	—	1
Waterworks	6	1	7
Welfare Services	9	1	10
	469	18	487

Other Examinations

Transport—Road Traffic Acts	71
Waterworks—Entrants	18
Education—Teachers	106
Health Department—	
(a) Entrants	42
(b) Special	11
	— 53
Parks and Cemeteries—Special	6
Children's—Special	1
Cleansing and Transport	1
Other Authorities	3
	— 259
Total	746
	<hr style="border-top: 3px double black;"/>
X-rays taken	10
Number of Persons referred to Consultant	17
Pathological examinations	99

There were eighteen samples of blood for Widal tests and eighteen samples of fæces taken from employees of the Waterworks Department.

THE BOROUGH CORONER'S REPORT FOR 1951

The deaths reported to the Coroner during the year 1951 were 276 (males 172, females 104).

Of this total, 19 were lunatics and mental defectives in institutions.

In 83 of the cases reported the deaths were investigated by the Coroner but no inquests held.

There were 193 inquests held (122 males and 71 females).

Of the 193 inquests, 66 were held with a jury.

There were 173 post-mortem examinations, in 49 of which no inquest was held. The expenses of the inquests amounted to £694 5s. 11d.

The verdicts returned were:—

Suicides, 28 (males 18, females 10).

Accident or misadventure, 76 (males 37, females 39).

Natural causes, 85 (males 64, females 21).

Open verdicts, 1.

One stillbirth.

The ages of the 28 suicides were as follows:—

Between 21 and 30 years of age	2
Between 30 and 40 years of age	2
Between 40 and 50 years of age	4
Between 50 and 60 years of age	4
60 years and over	16

The types of suicide were:—

Gassing	19
Hanging	3
Drinking ammonia	2
Cut throat	1
Overdose of sleeping tablets	3

There were two inquests on infants suffocated whilst in bed with their parents.

There were two cases adjourned under Section 20 of the Coroner's (Amendment) Act, 1926, and not resumed, in one a person was subsequently found not guilty of manslaughter and in the other a person charged with infanticide was found insane.

In 1950, there were 263 deaths reported, 170 inquests were held, and the expenses were £618 4s. 4d.

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